

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)**USE FEC MAILING LABEL  
OR TYPE OR PRINT**Example: If typing, type  
over the lines

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

ADDRESS (number and street)

PO Box 150064

Check if different  
than previously  
reported. (ACC)

Grand Rapids

MI

49515

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00402800

3. IS THIS  
REPORTNEW  
(N)**OR**AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

April 15  
Quarterly Report(Q1)July 15  
Quarterly Report(Q2)October 15  
Quarterly Report(Q3)January 31  
Quarterly Report(YE)July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)Termination Report  
(TER)(b) Monthly  
Report  
Due On:

Feb 20 (M2)



May 20 (M5)



Aug 20 (M8)

Nov 20 (M11)  
(Non-Election  
Year Only)

Mar 20 (M3)



Jun 20 (M6)



Sep 20 (M9)

Dec 20 (M12)  
(Non-Election  
Year Only)

Apr 20 (M4)



Jul 20 (M7)



Oct 20 (M10)



Jan 31 (YE)

(c) 12-Day  
**PRE-Election**  
Report for the:

Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post -Election**  
Report for the:

General (30G)



Runoff (30R)



Special (30S)

Election on

in the  
State of

5. Covering Period

07

01

2005

through

12

31

2005

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Stephen Shaff

Signature of Treasurer

Electronically Filed by Stephen Shaff

Date

05

30

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	5

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	5

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2005</span>		6260.18
(b) Cash on Hand at Beginning of Reporting Period .....	5958.31	
(c) Total Receipts (from Line 19) .....	107963.07	242331.11
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	113921.38	248591.29
7. Total Disbursements (from Line 31) .....	95475.28	230145.19
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	18446.10	18446.10
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

☐ This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	7	0	1	2	0	0	5

To:

M	M	D	D	Y	Y	Y	Y
1	2	3	1	2	0	0	5

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	43295.52	84702.83
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	62167.55	155128.28
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	105463.07	239831.11
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	2500.00	2500.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	107963.07	242331.11
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	107963.07	242331.11
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	107963.07	242331.11

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	95356.28	230026.19
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	95356.28	230026.19
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	119.00	119.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	119.00	119.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	95475.28	230145.19
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	95475.28	230145.19

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	107963.07	242331.11
34. Total Contribution Refunds (from Line 28(d)) .....	119.00	119.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	107844.07	242212.11
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	95356.28	230026.19
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	95356.28	230026.19

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

William Allen

Mailing Address 112 Coleman Dr.

City

Beaver

State

PA

Zip Code

15009

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 7 / 2 0 0 5

Transaction ID: SA11AI.11079

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

William Allen

Mailing Address 112 Coleman Dr.

City

Beaver

State

PA

Zip Code

15009

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 1 9 / 2 0 0 5

Transaction ID: SA11AI.12031

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Joan Alpern

Mailing Address 18 Waldfrieden Lane

City

Saugerties

State

NY

Zip Code

12477

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 2 2 / 2 0 0 5

Transaction ID: SA11AI.12033

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

225.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 288

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

John Anderson

Mailing Address PO Box 101

City

Lake Pleasant

State

MA

Zip Code

01347

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DietzOccupation  
Architect

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 6 / 2 0 0 5

Transaction ID: SA11AI.12040

Amount of Each Receipt this Period

40.00

**B.**

Full Name (Last, First, Middle Initial)

Robert Appleyard

Mailing Address 3949 Appletree Dr.

City

Valrico

State

FL

Zip Code

33594

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Transcend Development Cor-  
p.Occupation  
Homebuilder

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 7 / 2 0 0 5

Transaction ID: SA11AI.11083

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Robert Appleyard

Mailing Address 3949 Appletree Dr.

City

Valrico

State

FL

Zip Code

33594

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Transcend Development Cor-  
p.Occupation  
Homebuilder

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 6 / 2 0 0 5

Transaction ID: SA11AI.11530

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional) .....

90.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 288

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Robert Appleyard

Mailing Address 3949 Appletree Dr.

City

Valrico

State

FL

Zip Code

33594

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Transcend Development Cor-  
p.

Occupation

Homebuilder

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 6 / 2 0 0 5

Transaction ID: SA11AI.12041

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Alan Arnold

Mailing Address PO Box 150

City

Wharton

State

NJ

Zip Code

07885

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MTA

Occupation

Senior Engineer/Analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 0 5

Transaction ID: SA11AI.11086

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Alan Arnold

Mailing Address PO Box 150

City

Wharton

State

NJ

Zip Code

07885

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MTA

Occupation

Senior Engineer/Analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 5 / 2 0 0 5

Transaction ID: SA11AI.11531

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional) .....

75.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Alan Arnold

Mailing Address PO Box 150

City

Wharton

State

NJ

Zip Code

07885

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MTA

Occupation

Senior Engineer/Analyst

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 2 5 / 2 0 0 5

Transaction ID: SA11AI.12043

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Chris Avery

Mailing Address 100 Ormond Ct.

City

Novato

State

CA

Zip Code

94947

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Student

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

532.50

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 2 / 2 0 0 5

Transaction ID: SA11AI.11536

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Chris Avery

Mailing Address 100 Ormond Ct.

City

Novato

State

CA

Zip Code

94947

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Student

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

632.50

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 2 8 / 2 0 0 5

Transaction ID: SA11AI.12047

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

175.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Judy Barrett

Mailing Address 551 W. Cordova #462

City

Santa Fe

State

NM

Zip Code

87501

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Writer/Editor

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 0 / 2 0 0 5

Transaction ID: SA11AI.12055

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Judy Barrett

Mailing Address 551 W. Cordova #462

City

Santa Fe

State

NM

Zip Code

87501

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Writer/Editor

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 5

Transaction ID: SA11AI.12056

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Lu Bauer

Mailing Address PO Box 457

City

Windham

State

ME

Zip Code

04062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

CPA

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 8 / 2 0 0 5

Transaction ID: SA11AI.11546

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

175.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Paul Beach

Mailing Address 1211 Foulkrod St.

City

Philadelphia

State

PA

Zip Code

19124

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 4 / 2 0 0 5

Transaction ID: SA11AI.9026

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

Paul Beach

Mailing Address 1211 Foulkrod St.

City

Philadelphia

State

PA

Zip Code

19124

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.9690

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

Paul Beach

Mailing Address 1211 Foulkrod St.

City

Philadelphia

State

PA

Zip Code

19124

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 5

Transaction ID: SA11AI.10472

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional) .....

45.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Paul Beach

Mailing Address 1211 Foulkrod St.

City

Philadelphia

State

PA

Zip Code

19124

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 0 / 2 0 0 5

Transaction ID: SA11AI.11100

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

Paul Beach

Mailing Address 1211 Foulkrod St.

City

Philadelphia

State

PA

Zip Code

19124

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 0 / 2 0 0 5

Transaction ID: SA11AI.11547

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

Paul Beach

Mailing Address 1211 Foulkrod St.

City

Philadelphia

State

PA

Zip Code

19124

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 0 / 2 0 0 5

Transaction ID: SA11AI.12058

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional) .....

45.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Avery Beer

Mailing Address 106 Cobblestone Ct. Dr. #172

City State Zip Code  
Victor NY 14564

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Medical

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 3 / 2 0 0 5

Transaction ID: SA11AI.9029

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Avery Beer

Mailing Address 106 Cobblestone Ct. Dr. #172

City State Zip Code  
Victor NY 14564

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Medical

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 2 1 / 2 0 0 5

Transaction ID: SA11AI.12060

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Francis Bellezza

Mailing Address 161 Morris Ave.

City State Zip Code  
Athens OH 45701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ohio University

Occupation  
Educator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 6 / 2 0 0 5

Transaction ID: SA11AI.9694

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

175.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Francis Bellezza

Mailing Address 161 Morris Ave.

City

Athens

State

OH

Zip Code

45701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ohio University

Occupation  
Educator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 8 / 2 0 0 5

Transaction ID: SA11AI.9695

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Francis Bellezza

Mailing Address 161 Morris Ave.

City

Athens

State

OH

Zip Code

45701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ohio University

Occupation  
Educator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 4 / 2 0 0 5

Transaction ID: SA11AI.10475

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Francis Bellezza

Mailing Address 161 Morris Ave.

City

Athens

State

OH

Zip Code

45701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ohio University

Occupation  
Educator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 5

Transaction ID: SA11AI.11105

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Francis Bellezza

Mailing Address 161 Morris Ave.

City

Athens

State

OH

Zip Code

45701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ohio University

Occupation  
Educator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 4 / 2 0 0 5

Transaction ID: SA11AI.11551

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Francis Bellezza

Mailing Address 161 Morris Ave.

City

Athens

State

OH

Zip Code

45701

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ohio University

Occupation  
Educator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 4 / 2 0 0 5

Transaction ID: SA11AI.12063

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Jean Bernstein

Mailing Address 30832 Driftwood Dr.

City

Laguna Beach

State

CA

Zip Code

92651

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Housewife

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 3 / 2 0 0 5

Transaction ID: SA11AI.11109

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Jean Bernstein

Mailing Address 30832 Driftwood Dr.

City

Laguna Beach

State

CA

Zip Code

92651

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Housewife

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

415.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 1 / 2 0 0 5

Transaction ID: SA11AI.11110

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

Jean Bernstein

Mailing Address 30832 Driftwood Dr.

City

Laguna Beach

State

CA

Zip Code

92651

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Housewife

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 0 / 2 0 0 5

Transaction ID: SA11AI.11556

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

Jean Bernstein

Mailing Address 30832 Driftwood Dr.

City

Laguna Beach

State

CA

Zip Code

92651

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Housewife

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

445.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 0 / 2 0 0 5

Transaction ID: SA11AI.12068

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional) .....

45.00

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 288

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

William Black

Mailing Address 1220 Independence Ave., SE

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pan American Health Org.

Occupation

Editor/Writer

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

212.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 8 / 2 0 0 5

Transaction ID: SA11AI.12072

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Pauline Blazon

Mailing Address 59 Fath Dr.

City

Hampstead

State

NH

Zip Code

03841

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fidelity Investments

Occupation

Director

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 6 / 2 0 0 5

Transaction ID: SA11AI.9710

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

Pauline Blazon

Mailing Address 59 Fath Dr.

City

Hampstead

State

NH

Zip Code

03841

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fidelity Investments

Occupation

Director

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 8 / 2 0 0 5

Transaction ID: SA11AI.9711

Amount of Each Receipt this Period

15.00

SUBTOTAL of Receipts This Page (optional) .....

55.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Pauline Blazon

Mailing Address 59 Fath Dr.

City

Hampstead

State

NH

Zip Code

03841

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fidelity Investments

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 7 / 2 0 0 5

Transaction ID: SA11AI.10483

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

Pauline Blazon

Mailing Address 59 Fath Dr.

City

Hampstead

State

NH

Zip Code

03841

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fidelity Investments

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 5

Transaction ID: SA11AI.11114

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

Pauline Blazon

Mailing Address 59 Fath Dr.

City

Hampstead

State

NH

Zip Code

03841

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fidelity Investments

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 5

Transaction ID: SA11AI.11562

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional) .....

45.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Pauline Blazon

Mailing Address 59 Fath Dr.

City

Hampstead

State

NH

Zip Code

03841

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fidelity Investments

Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 7 / 2 0 0 5

Transaction ID: SA11AI.12073

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

Roger Bloom

Mailing Address 218A 19h St.

City

Huntington Beach

State

CA

Zip Code

92648

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rutan & Tucker

Occupation  
Marketing Dir.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 5

Transaction ID: SA11AI.10484

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Roger Bloom

Mailing Address 218A 19h St.

City

Huntington Beach

State

CA

Zip Code

92648

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rutan & Tucker

Occupation  
Marketing Dir.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 8 / 2 0 0 5

Transaction ID: SA11AI.11117

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

65.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Roger Bloom

Mailing Address 218A 19h St.

City

Huntington Beach

State

CA

Zip Code

92648

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rutan & Tucker

Occupation

Marketing Dir.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 8 / 2 0 0 5

Transaction ID: SA11AI.11563

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Roger Bloom

Mailing Address 218A 19h St.

City

Huntington Beach

State

CA

Zip Code

92648

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rutan & Tucker

Occupation

Marketing Dir.

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 8 / 2 0 0 5

Transaction ID: SA11AI.12074

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Thomas Bohlen

Mailing Address 14021 E. Becker Lane

City

Scottsdale

State

AZ

Zip Code

85259

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Oracle Architect

Occupation

Owner/Architect

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 1 / 2 0 0 5

Transaction ID: SA11AI.9715

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Thomas Bohlen

Mailing Address 14021 E. Becker Lane

City

Scottsdale

State

AZ

Zip Code

85259

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Oracle Architect

Occupation

Owner/Architect

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 6 / 2 0 0 5

Transaction ID: SA11AI.9716

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Thomas Bohlen

Mailing Address 14021 E. Becker Lane

City

Scottsdale

State

AZ

Zip Code

85259

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Oracle Architect

Occupation

Owner/Architect

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 6 / 2 0 0 5

Transaction ID: SA11AI.10487

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Thomas Bohlen

Mailing Address 14021 E. Becker Lane

City

Scottsdale

State

AZ

Zip Code

85259

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Oracle Architect

Occupation

Owner/Architect

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 6 / 2 0 0 5

Transaction ID: SA11AI.11119

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Thomas Bohlen

Mailing Address 14021 E. Becker Lane

City

Scottsdale

State

AZ

Zip Code

85259

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Oracle Architect

Occupation

Owner/Architect

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 6 / 2 0 0 5

Transaction ID: SA11AI.11564

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Thomas Bohlen

Mailing Address 14021 E. Becker Lane

City

Scottsdale

State

AZ

Zip Code

85259

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Oracle Architect

Occupation

Owner/Architect

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 6 / 2 0 0 5

Transaction ID: SA11AI.12075

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

David Bortz

Mailing Address 1700 London Rd.

City

Cleveland

State

OH

Zip Code

44112

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Tribco Inc.

Occupation

President

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 8 / 2 0 0 5

Transaction ID: SA11AI.12078

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Kathleen Bridgewater

Mailing Address 167 Shutesbury Rd.

City

Amherst

State

MA

Zip Code

01002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Wildwood School

Occupation  
Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 7 / 2 0 0 5

Transaction ID: SA11AI.12084

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

Gregory Britt

Mailing Address 13102 Huston St.

City

Sherman Oaks

State

CA

Zip Code

91423

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AIDS Research Alliance

Occupation  
CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 5

Transaction ID: SA11AI.11129

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Judith Broder

Mailing Address 1200 Iredell St.

City

Studio City

State

CA

Zip Code

91604

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 5 / 2 0 0 5

Transaction ID: SA11AI.11131

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

770.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

William Brown

Mailing Address 209 Harding Ave.

City

Collingwood

State

NJ

Zip Code

08108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 7 / 2 0 0 5

Transaction ID: SA11AI.12090

Amount of Each Receipt this Period

35.00

**B.**

Full Name (Last, First, Middle Initial)

Dan Bucatinsky

Mailing Address 2402 Bowmont Dr.

City

Beverly Hills

State

CA

Zip Code

90210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Screenwriter/Producer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 5 / 2 0 0 5

Transaction ID: SA11AI.11136

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Jeffrey Burman

Mailing Address 24022 Hatteras St.

City

Woodland Hills

State

CA

Zip Code

91367

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NBC Universal

Occupation  
Sound Editor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 7 / 2 0 0 5

Transaction ID: SA11AI.12093

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

385.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Shahid Buttar

Mailing Address 1234 Massachusetts Ave., NW  
Apt. 905

City State Zip Code  
Washington DC 20005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Am. Constitution Society

Occupation  
Lawyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 1 / 2 0 0 5

Transaction ID: SA11AI.11584

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Shahid Buttar

Mailing Address 1234 Massachusetts Ave., NW  
Apt. 905

City State Zip Code  
Washington DC 20005

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Am. Constitution Society

Occupation  
Lawyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 1 / 2 0 0 5

Transaction ID: SA11AI.12096

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Bill Calhoun

Mailing Address 1611 Pinehurst Dr.

City State Zip Code  
Lady Lake FL 32159

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 5 / 2 0 0 5

Transaction ID: SA11AI.9073

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Bill Calhoun

Mailing Address 1611 Pinehurst Dr.

City

Lady Lake

State

FL

Zip Code

32159

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 6 / 2 0 0 5

Transaction ID: SA11AI.9742

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Bill Calhoun

Mailing Address 1611 Pinehurst Dr.

City

Lady Lake

State

FL

Zip Code

32159

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.10507

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Bill Calhoun

Mailing Address 1611 Pinehurst Dr.

City

Lady Lake

State

FL

Zip Code

32159

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.11148

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Bill Calhoun

Mailing Address 1611 Pinehurst Dr.

City

Lady Lake

State

FL

Zip Code

32159

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.11587

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Bill Calhoun

Mailing Address 1611 Pinehurst Dr.

City

Lady Lake

State

FL

Zip Code

32159

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.12098

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Michael Carano

Mailing Address 573 Narragansett Drive

City

Tallmadge

State

OH

Zip Code

44278

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UPS

Occupation  
Truck Driver

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 4 / 2 0 0 5

Transaction ID: SA11AI.9076

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional) .....

120.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Michael Carano

Mailing Address 573 Narragansett Drive

City

Tallmadge

State

OH

Zip Code

44278

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UPS

Occupation

Truck Driver

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 8 / 2 0 0 5

Transaction ID: SA11AI.9743

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Michael Carano

Mailing Address 573 Narragansett Drive

City

Tallmadge

State

OH

Zip Code

44278

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UPS

Occupation

Truck Driver

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 7 / 2 0 0 5

Transaction ID: SA11AI.10508

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Michael Carano

Mailing Address 573 Narragansett Drive

City

Tallmadge

State

OH

Zip Code

44278

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UPS

Occupation

Truck Driver

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 7 / 2 0 0 5

Transaction ID: SA11AI.11150

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 29 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Michael Carano

Mailing Address 573 Narragansett Drive

City

Tallmadge

State

OH

Zip Code

44278

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UPS

Occupation

Truck Driver

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

419.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 7 / 2 0 0 5

Transaction ID: SA11AI.11592

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Michael Carano

Mailing Address 573 Narragansett Drive

City

Tallmadge

State

OH

Zip Code

44278

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UPS

Occupation

Truck Driver

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

469.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 1 7 / 2 0 0 5

Transaction ID: SA11AI.12100

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Tim Carpenter

Mailing Address 18 Beacon St.

City

Florence

State

MA

Zip Code

01062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Political Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 3 / 2 0 0 5

Transaction ID: SA11AI.11152

Amount of Each Receipt this Period

230.00

**SUBTOTAL** of Receipts This Page (optional) .....

330.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Tim Carpenter

Mailing Address 18 Beacon St.

City

Florence

State

MA

Zip Code

01062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Political Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1330.20

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 2 3 / 2 0 0 5

Transaction ID: SA11AI.12103

Amount of Each Receipt this Period

1100.20

**B.**

Full Name (Last, First, Middle Initial)

Angela Cavalieri

Mailing Address 7750 Gabor St.

City

Valley Springs

State

CA

Zip Code

95252

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SCRIPT

Occupation

Curator/Artist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 5 / 2 0 0 5

Transaction ID: SA11AI.9750

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Angela Cavalieri

Mailing Address 7750 Gabor St.

City

Valley Springs

State

CA

Zip Code

95252

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SCRIPT

Occupation

Curator/Artist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 2 1 / 2 0 0 5

Transaction ID: SA11AI.9751

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

1200.20

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Angela Cavalieri

Mailing Address 7750 Gabor St.

City

Valley Springs

State

CA

Zip Code

95252

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SCRIPT

Occupation

Curator/Artist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 9 / 2 0 0 5

Transaction ID: SA11AI.10513

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Angela Cavalieri

Mailing Address 7750 Gabor St.

City

Valley Springs

State

CA

Zip Code

95252

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SCRIPT

Occupation

Curator/Artist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 9 / 2 0 0 5

Transaction ID: SA11AI.11154

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Angela Cavalieri

Mailing Address 7750 Gabor St.

City

Valley Springs

State

CA

Zip Code

95252

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SCRIPT

Occupation

Curator/Artist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 5

Transaction ID: SA11AI.11594

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Angela Cavalieri

Mailing Address 7750 Gabor St.

City

Valley Springs

State

CA

Zip Code

95252

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SCRIPT

Occupation

Curator/Artist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 9 / 2 0 0 5

Transaction ID: SA11AI.12106

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

William Cheever

Mailing Address 29 Concord St. #2

City

Charlestown

State

MA

Zip Code

02129

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Boston Architectural Cen-  
ter

Occupation

Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 8 / 2 0 0 5

Transaction ID: SA11AI.12107

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Dylan Clayton

Mailing Address 1418 Greenleaf FL1

City

Evanston

State

IL

Zip Code

60202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Oakton Comm College

Occupation

Student

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 5

Transaction ID: SA11AI.11159

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional) .....

90.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Dylan Clayton

Mailing Address 1418 Greenleaf FL1

City

Evanston

State

IL

Zip Code

60202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Oakton Comm College

Occupation  
Student

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 2 / 2 0 0 5

Transaction ID: SA11AI.11601

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

Dylan Clayton

Mailing Address 1418 Greenleaf FL1

City

Evanston

State

IL

Zip Code

60202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Oakton Comm College

Occupation  
Student

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 5 / 2 0 0 5

Transaction ID: SA11AI.12114

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

Robert Cleveland

Mailing Address 1525 Buchanan St., NW

City

Washington

State

DC

Zip Code

20011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FCC

Occupation  
Scientist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 1 / 2 0 0 5

Transaction ID: SA11AI.10520

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

55.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Robert Cleveland

Mailing Address 1525 Buchanan St., NW

City

Washington

State

DC

Zip Code

20011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FCC

Occupation  
Scientist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 1 1 / 2 0 0 5

Transaction ID: SA11AI.11160

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Robert Cleveland

Mailing Address 1525 Buchanan St., NW

City

Washington

State

DC

Zip Code

20011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FCC

Occupation  
Scientist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 1 / 2 0 0 5

Transaction ID: SA11AI.11602

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Robert Cleveland

Mailing Address 1525 Buchanan St., NW

City

Washington

State

DC

Zip Code

20011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FCC

Occupation  
Scientist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 1 1 / 2 0 0 5

Transaction ID: SA11AI.12115

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Jean Cochran

Mailing Address 900 E. Harrison Ave.

City

Pomoma

State

CA

Zip Code

91767

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NPR

Occupation  
Newscaster

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 3 / 2 0 0 5

Transaction ID: SA11AI.12117

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

Irma Colen

Mailing Address 2727 Krim Dr.

City

Los Angeles

State

CA

Zip Code

90064

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 3 / 2 0 0 5

Transaction ID: SA11AI.11167

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

James Cook

Mailing Address 2412 Farthing St.

City

Durham

State

NC

Zip Code

27704

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
North Carolina State Univ.

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 9 / 2 0 0 5

Transaction ID: SA11AI.12120

Amount of Each Receipt this Period

400.00

**SUBTOTAL** of Receipts This Page (optional) .....

465.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Catarina Correia

Mailing Address 4115 Wisconsin Ave. NW #301

City

Washington

State

DC

Zip Code

20016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Activist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.11611

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Catarina Correia

Mailing Address 4115 Wisconsin Ave. NW #301

City

Washington

State

DC

Zip Code

20016

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Activist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.12124

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Karen Corsano

Mailing Address 287 Harvard St.

City

Cambridge

State

MA

Zip Code

02139

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Partners Healthcare

Occupation  
Programmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 5

Transaction ID: SA11AI.9783

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional) .....

90.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 288

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Karen Corsano

Mailing Address 287 Harvard St.

City

Cambridge

State

MA

Zip Code

02139

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Partners Healthcare

Occupation

Programmer

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 1 / 2 0 0 5

Transaction ID: SA11AI.11172

Amount of Each Receipt this Period

40.00

**B.**

Full Name (Last, First, Middle Initial)

Karen Corsano

Mailing Address 287 Harvard St.

City

Cambridge

State

MA

Zip Code

02139

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Partners Healthcare

Occupation

Programmer

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 1 / 2 0 0 5

Transaction ID: SA11AI.11612

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)

Karen Corsano

Mailing Address 287 Harvard St.

City

Cambridge

State

MA

Zip Code

02139

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Partners Healthcare

Occupation

Programmer

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 1 / 2 0 0 5

Transaction ID: SA11AI.12125

Amount of Each Receipt this Period

40.00

SUBTOTAL of Receipts This Page (optional) .....

120.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Dem Store

Mailing Address 5104 Macarthur Blvd. NW

City

Washington

State

DC

Zip Code

20016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.14

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 5

Transaction ID: SA11AI.11183

Amount of Each Receipt this Period

252.14

Refund

**B.**

Full Name (Last, First, Middle Initial)

Dem Store

Mailing Address 5104 Macarthur Blvd. NW

City

Washington

State

DC

Zip Code

20016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

504.28

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 5

Transaction ID: SA11AI.12967

Amount of Each Receipt this Period

252.14

**C.**

Full Name (Last, First, Middle Initial)

Dem Store

Mailing Address 5104 Macarthur Blvd. NW

City

Washington

State

DC

Zip Code

20016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

756.42

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 5

Transaction ID: SA11AI.12969

Amount of Each Receipt this Period

252.14

Refund from button order

**SUBTOTAL** of Receipts This Page (optional) .....

756.42

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 39 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Allegra Dengler

Mailing Address 60 Judson Ave.

City

Dobbs Ferry

State

NY

Zip Code

10522

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Howard Stasson Foundation

Occupation  
Trustee

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 5

Transaction ID: SA11AI.10557

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Allegra Dengler

Mailing Address 60 Judson Ave.

City

Dobbs Ferry

State

NY

Zip Code

10522

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Howard Stasson Foundation

Occupation  
Trustee

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 3 / 2 0 0 5

Transaction ID: SA11AI.12141

Amount of Each Receipt this Period

150.00

**C.**

Full Name (Last, First, Middle Initial)

Arthur Dexter

Mailing Address 507 E. Locust #301

City

Des Moines

State

IA

Zip Code

50309

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

569.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 8 / 2 0 0 5

Transaction ID: SA11AI.11624

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

250.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 288

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Arthur Dexter

Mailing Address 507 E. Locust #301

City

Des Moines

State

IA

Zip Code

50309

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

619.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 1 8 / 2 0 0 5

Transaction ID: SA11AI.12144

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Susan Dietz

Mailing Address 3905 Ventura Canyon Ave.

City

Sherman Oaks

State

CA

Zip Code

91423

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Producer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 3 / 2 0 0 5

Transaction ID: SA11AI.9131

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Susan Dietz

Mailing Address 3905 Ventura Canyon Ave.

City

Sherman Oaks

State

CA

Zip Code

91423

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Producer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.9132

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) .....

250.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Susan Dietz

Mailing Address 3905 Ventura Canyon Ave.

City

Sherman Oaks

State

CA

Zip Code

91423

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Producer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 6 / 2 0 0 5

Transaction ID: SA11AI.9816

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Susan Dietz

Mailing Address 3905 Ventura Canyon Ave.

City

Sherman Oaks

State

CA

Zip Code

91423

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Producer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1100.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 8 / 2 0 0 5

Transaction ID: SA11AI.9817

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Susan Dietz

Mailing Address 3905 Ventura Canyon Ave.

City

Sherman Oaks

State

CA

Zip Code

91423

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Producer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1200.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 7 / 2 0 0 5

Transaction ID: SA11AI.10560

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Susan Dietz

Mailing Address 3905 Ventura Canyon Ave.

City

Sherman Oaks

State

CA

Zip Code

91423

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Producer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 5

Transaction ID: SA11AI.11184

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Susan Dietz

Mailing Address 3905 Ventura Canyon Ave.

City

Sherman Oaks

State

CA

Zip Code

91423

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Producer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 5

Transaction ID: SA11AI.11625

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Susan Dietz

Mailing Address 3905 Ventura Canyon Ave.

City

Sherman Oaks

State

CA

Zip Code

91423

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Producer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 7 / 2 0 0 5

Transaction ID: SA11AI.12145

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 288

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Vera Dulaney

Mailing Address 2849 NE 32 St.

City

Lighthouse Point

State

FL

Zip Code

33064

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
IBM

Occupation

Computer Operator

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 8 / 2 0 0 5

Transaction ID: SA11AI.11189

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Vera Dulaney

Mailing Address 2849 NE 32 St.

City

Lighthouse Point

State

FL

Zip Code

33064

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
IBM

Occupation

Computer Operator

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 8 / 2 0 0 5

Transaction ID: SA11AI.11628

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Vera Dulaney

Mailing Address 2849 NE 32 St.

City

Lighthouse Point

State

FL

Zip Code

33064

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
IBM

Occupation

Computer Operator

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 8 / 2 0 0 5

Transaction ID: SA11AI.12153

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional) .....

75.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Randy Durband

Mailing Address 16542 E. Lost Arrow Dr.  
Unit B

City State Zip Code  
Fountain Hills AZ 85268

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 2 / 2 0 0 5

Transaction ID: SA11AI.9835

Amount of Each Receipt this Period

40.00

**B.**

Full Name (Last, First, Middle Initial)

Randy Durband

Mailing Address 16542 E. Lost Arrow Dr.  
Unit B

City State Zip Code  
Fountain Hills AZ 85268

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 5

Transaction ID: SA11AI.9836

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)

Randy Durband

Mailing Address 16542 E. Lost Arrow Dr.  
Unit B

City State Zip Code  
Fountain Hills AZ 85268

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 2 / 2 0 0 5

Transaction ID: SA11AI.11192

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional) .....

120.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Randy Durband

Mailing Address 16542 E. Lost Arrow Dr.  
Unit B

City State Zip Code  
Fountain Hills AZ 85268

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 2 / 2 0 0 5

Transaction ID: SA11AI.11630

Amount of Each Receipt this Period

40.00

**B.**

Full Name (Last, First, Middle Initial)

Randy Durband

Mailing Address 16542 E. Lost Arrow Dr.  
Unit B

City State Zip Code  
Fountain Hills AZ 85268

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 2 / 2 0 0 5

Transaction ID: SA11AI.12156

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)

Randy Durband

Mailing Address 16542 E. Lost Arrow Dr.  
Unit B

City State Zip Code  
Fountain Hills AZ 85268

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

590.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 9 / 2 0 0 5

Transaction ID: SA11AI.12157

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional) .....

280.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

J. Douglas Elliott

Mailing Address 1232 Dell Dr.

City

Monterey Park

State

CA

Zip Code

91754

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 4 / 2 0 0 5

Transaction ID: SA11AI.9146

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

J. Douglas Elliott

Mailing Address 1232 Dell Dr.

City

Monterey Park

State

CA

Zip Code

91754

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.9841

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

J. Douglas Elliott

Mailing Address 1232 Dell Dr.

City

Monterey Park

State

CA

Zip Code

91754

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 3 / 2 0 0 5

Transaction ID: SA11AI.12164

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

200.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Dianne Engleke

Mailing Address 283 Silver Mt. Rd.

City

Millerton

State

NY

Zip Code

12546

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Artist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.9847

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

Dianne Engleke

Mailing Address 283 Silver Mt. Rd.

City

Millerton

State

NY

Zip Code

12546

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Artist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.10576

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

Dianne Engleke

Mailing Address 283 Silver Mt. Rd.

City

Millerton

State

NY

Zip Code

12546

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Artist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.11198

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional) .....

90.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Dianne Engleke

Mailing Address 283 Silver Mt. Rd.

City

Millerton

State

NY

Zip Code

12546

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Artist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.11641

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

Dianne Engleke

Mailing Address 283 Silver Mt. Rd.

City

Millerton

State

NY

Zip Code

12546

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Artist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.12168

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

Michael Ferro, Jr.

Mailing Address 4281 Knoll Ave.

City

Oakland

State

CA

Zip Code

94619

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Davis St. Family Resource  
Cent

Occupation  
Therapist Intern

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.9161

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

160.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Kim Floyd

Mailing Address 5375 Shirley J. Lane  
PO Box 422

City State Zip Code  
Wrightwood CA 92397

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 7 / 2 0 0 5

Transaction ID: SA11AI.12177

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Bert Garskof

Mailing Address 81 Humiston Dr.

City State Zip Code  
Bethany CT 06524

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 5 / 2 0 0 5

Transaction ID: SA11AI.12186

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Adele Goodell

Mailing Address 1346 RT 5

City State Zip Code  
Putney VT 05346

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Occupational Therapist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 5

Transaction ID: SA11AI.9889

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional) .....

2775.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Robert Goodman

Mailing Address 2302 Dancing Fox Rd.

City

Decatur

State

GA

Zip Code

30032

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Powell Goldstein LLP

Occupation

Legal Secretary

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 1 / 2 0 0 5

Transaction ID: SA11AI.11665

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Robert Goodman

Mailing Address 2302 Dancing Fox Rd.

City

Decatur

State

GA

Zip Code

30032

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Powell Goldstein LLP

Occupation

Legal Secretary

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 9 / 2 0 0 5

Transaction ID: SA11AI.12195

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Juliet Gorman

Mailing Address 1875 Whitehurst Dr.

City

Monterey Park

State

CA

Zip Code

91755

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bill Gorman & Assoc., Inc.

Occupation

Secretary

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 5 / 2 0 0 5

Transaction ID: SA11AI.11666

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Juliet Gorman

Mailing Address 1875 Whitehurst Dr.

City

Monterey Park

State

CA

Zip Code

91755

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Bill Gorman & Assoc., Inc.

Occupation  
Secretary

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 5 / 2 0 0 5

Transaction ID: SA11AI.12196

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Margery Gould

Mailing Address 5671 Spreading Oak Dr.

City

Los Angeles

State

CA

Zip Code

90068

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Artist/Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 5 / 2 0 0 5

Transaction ID: SA11AI.9213

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Margery Gould

Mailing Address 5671 Spreading Oak Dr.

City

Los Angeles

State

CA

Zip Code

90068

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Artist/Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 6 / 2 0 0 5

Transaction ID: SA11AI.9896

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

125.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Margery Gould

Mailing Address 5671 Spreading Oak Dr.

City

Los Angeles

State

CA

Zip Code

90068

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Artist/Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.10616

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Margery Gould

Mailing Address 5671 Spreading Oak Dr.

City

Los Angeles

State

CA

Zip Code

90068

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Artist/Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.11226

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Margery Gould

Mailing Address 5671 Spreading Oak Dr.

City

Los Angeles

State

CA

Zip Code

90068

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Artist/Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.11668

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Margery Gould

Mailing Address 5671 Spreading Oak Dr.

City

Los Angeles

State

CA

Zip Code

90068

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Artist/Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.12197

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Jodi Guyot

Mailing Address 4332 N. 41st. Pl.

City

Phoenix

State

AZ

Zip Code

85018

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Arizona State University

Occupation

Research Coordinator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 7 / 2 0 0 5

Transaction ID: SA11AI.10626

Amount of Each Receipt this Period

35.00

**C.**

Full Name (Last, First, Middle Initial)

Jodi Guyot

Mailing Address 4332 N. 41st. Pl.

City

Phoenix

State

AZ

Zip Code

85018

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Arizona State University

Occupation

Research Coordinator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.11235

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

110.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Jodi Guyot

Mailing Address 4332 N. 41st. Pl.

City

Phoenix

State

AZ

Zip Code

85018

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Arizona State University

Occupation

Research Coordinator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.11677

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Jodi Guyot

Mailing Address 4332 N. 41st. Pl.

City

Phoenix

State

AZ

Zip Code

85018

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Arizona State University

Occupation

Research Coordinator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.12206

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Bruce Hall

Mailing Address 611 Meyer Ave.

City

Ft. Wayne

State

IN

Zip Code

46807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PHD, Inc.

Occupation

QC Inspector/CMM programmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 3 / 2 0 0 5

Transaction ID: SA11AI.11237

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Bruce Hall

Mailing Address 611 Meyer Ave.

City

Ft. Wayne

State

IN

Zip Code

46807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PHD, Inc.

Occupation

QC Inspector/CMM programmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 3 / 2 0 0 5

Transaction ID: SA11AI.11678

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Bruce Hall

Mailing Address 611 Meyer Ave.

City

Ft. Wayne

State

IN

Zip Code

46807

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PHD, Inc.

Occupation

QC Inspector/CMM programmer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 0 / 2 0 0 5

Transaction ID: SA11AI.12207

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Mark Halvorson

Mailing Address 4136 44th Ave. South

City

Minneapolis

State

MN

Zip Code

55406

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 6 / 2 0 0 5

Transaction ID: SA11AI.9917

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Mark Halvorson

Mailing Address 4136 44th Ave. South

City

Minneapolis

State

MN

Zip Code

55406

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.10629

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Mark Halvorson

Mailing Address 4136 44th Ave. South

City

Minneapolis

State

MN

Zip Code

55406

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.11239

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Mark Halvorson

Mailing Address 4136 44th Ave. South

City

Minneapolis

State

MN

Zip Code

55406

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.11680

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 288

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Mark Halvorson

Mailing Address 4136 44th Ave. South

City

Minneapolis

State

MN

Zip Code

55406

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	4	/	2	0	0	5

Transaction ID: SA11AI.12209

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Mark Halvorson

Mailing Address 4136 44th Ave. South

City

Minneapolis

State

MN

Zip Code

55406

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

419.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	1	/	2	0	0	5

Transaction ID: SA11AI.12210

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Kathryn Hammond

Mailing Address 52 Riley Rd. #312

City

Celebration

State

FL

Zip Code

34747

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Polk County School DistrictOccupation  
Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	8	/	2	0	0	5

Transaction ID: SA11AI.12212

Amount of Each Receipt this Period

10.00

SUBTOTAL of Receipts This Page (optional) .....

135.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

William Harding

Mailing Address 157 Hanamu Rd.

City

Makawao

State

HI

Zip Code

96868

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Security Tech. LLC

Occupation  
Senior VP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 5

Transaction ID: SA11AI.11683

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Susan Harmon

Mailing Address 6121 White Oak Dr.

City

Flowry Branch

State

GA

Zip Code

30542

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gwinnett County Board of  
Ed.

Occupation  
Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 8 / 2 0 0 5

Transaction ID: SA11AI.10636

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Susan Harmon

Mailing Address 6121 White Oak Dr.

City

Flowry Branch

State

GA

Zip Code

30542

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gwinnett County Board of  
Ed.

Occupation  
Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 8 / 2 0 0 5

Transaction ID: SA11AI.11243

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Susan Harmon

Mailing Address 6121 White Oak Dr.

City

Flowry Branch

State

GA

Zip Code

30542

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gwinnett County Board of  
Ed.

Occupation  
Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 8 / 2 0 0 5

Transaction ID: SA11AI.11685

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Susan Harmon

Mailing Address 6121 White Oak Dr.

City

Flowry Branch

State

GA

Zip Code

30542

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Gwinnett County Board of  
Ed.

Occupation  
Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 8 / 2 0 0 5

Transaction ID: SA11AI.12219

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Roger Harrell

Mailing Address 514 24th St.

City

Hermosa Beach

State

CA

Zip Code

90254

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 9 / 2 0 0 5

Transaction ID: SA11AI.11687

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional) .....

70.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 60 / 288

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Tom Hayden

Mailing Address 1939 Westridge Terrace

City

Los Angeles

State

CA

Zip Code

90049

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
Author

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 3 / 2 0 0 5

Transaction ID: SA11AI.11245

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Thaddeus Heitmann

Mailing Address 2299 Crestview Pl.

City

Laguna Beach

State

CA

Zip Code

92651

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BioComm Network Inc.Occupation  
Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.9932

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Thaddeus Heitmann

Mailing Address 2299 Crestview Pl.

City

Laguna Beach

State

CA

Zip Code

92651

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BioComm Network Inc.Occupation  
Marketing

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 1 / 2 0 0 5

Transaction ID: SA11AI.10641

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional) .....

1100.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 288

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Ann Hellgren

Mailing Address 15904 South Saint Andrews Place

City

Gardena

State

CA

Zip Code

90247

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Educator/Businessperson

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 4 / 2 0 0 5

Transaction ID: SA11AI.11695

Amount of Each Receipt this Period

550.00

**B.**

Full Name (Last, First, Middle Initial)

Eleanor Henry

Mailing Address 1480 Bluebird Canyon

City

Laguna Beach

State

CA

Zip Code

92651

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 2 / 2 0 0 5

Transaction ID: SA11AI.9939

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

Eleanor Henry

Mailing Address 1480 Bluebird Canyon

City

Laguna Beach

State

CA

Zip Code

92651

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 5

Transaction ID: SA11AI.9940

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional) .....

610.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 288

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Eleanor Henry

Mailing Address 1480 Bluebird Canyon

City

Laguna Beach

State

CA

Zip Code

92651

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 1 / 2 0 0 5

Transaction ID: SA11AI.11253

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

Eleanor Henry

Mailing Address 1480 Bluebird Canyon

City

Laguna Beach

State

CA

Zip Code

92651

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 1 / 2 0 0 5

Transaction ID: SA11AI.11698

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

Eleanor Henry

Mailing Address 1480 Bluebird Canyon

City

Laguna Beach

State

CA

Zip Code

92651

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 1 / 2 0 0 5

Transaction ID: SA11AI.12226

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional) .....

90.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Ann Hiller

Mailing Address 116 Michael Ln.

City

Pacific Palisades

State

CA

Zip Code

90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 0 5

Transaction ID: SA11AI.9256

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

Ann Hiller

Mailing Address 116 Michael Ln.

City

Pacific Palisades

State

CA

Zip Code

90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 1 / 2 0 0 5

Transaction ID: SA11AI.9941

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

Ann Hiller

Mailing Address 116 Michael Ln.

City

Pacific Palisades

State

CA

Zip Code

90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 6 / 2 0 0 5

Transaction ID: SA11AI.9942

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional) .....

90.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Ann Hiller

Mailing Address 116 Michael Ln.

City

Pacific Palisades

State

CA

Zip Code

90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

510.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 5 / 2 0 0 5

Transaction ID: SA11AI.10652

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

Ann Hiller

Mailing Address 116 Michael Ln.

City

Pacific Palisades

State

CA

Zip Code

90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 5

Transaction ID: SA11AI.11254

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

Ann Hiller

Mailing Address 116 Michael Ln.

City

Pacific Palisades

State

CA

Zip Code

90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 5

Transaction ID: SA11AI.11699

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional) .....

90.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Ann Hiller

Mailing Address 116 Michael Ln.

City

Pacific Palisades

State

CA

Zip Code

90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 5 / 2 0 0 5

Transaction ID: SA11AI.12227

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

Harriet Hirsch

Mailing Address 1903 Memory Ct.

City

Vienna

State

VA

Zip Code

22182

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CAW

Occupation  
Community Organizer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 0 5

Transaction ID: SA11AI.9260

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Harriet Hirsch

Mailing Address 1903 Memory Ct.

City

Vienna

State

VA

Zip Code

22182

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CAW

Occupation  
Community Organizer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 5

Transaction ID: SA11AI.10653

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

230.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)**  
**ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 288

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Harriet Hirsch

Mailing Address 1903 Memory Ct.

City

Vienna

State

VA

Zip Code

22182

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CAW

Occupation

Community Organizer

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 5 / 2 0 0 5

Transaction ID: SA11AI.12228

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Tamara Hodgson

Mailing Address 950 N. Kings Rd., Apt. 233

City

West Hollywood

State

CA

Zip Code

90069

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Cedars-Sinai Medical Center

Occupation

Research Nurse

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 9 / 2 0 0 5

Transaction ID: SA11AI.11256

Amount of Each Receipt this Period

120.00

**C.**

Full Name (Last, First, Middle Initial)

David Hopkins

Mailing Address 15190 Yvonne Dr.

City

Morgan Hill

State

CA

Zip Code

95037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

None

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 0 5

Transaction ID: SA11AI.9265

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional) .....

270.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 67 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

David Hopkins

Mailing Address 15190 Yvonne Dr.

City

Morgan Hill

State

CA

Zip Code

95037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 5 / 2 0 0 5

Transaction ID: SA11AI.9266

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

David Hopkins

Mailing Address 15190 Yvonne Dr.

City

Morgan Hill

State

CA

Zip Code

95037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 6 / 2 0 0 5

Transaction ID: SA11AI.9946

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

David Hopkins

Mailing Address 15190 Yvonne Dr.

City

Morgan Hill

State

CA

Zip Code

95037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.10666

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 68 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

David Hopkins

Mailing Address 15190 Yvonne Dr.

City

Morgan Hill

State

CA

Zip Code

95037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.11261

Amount of Each Receipt this Period

60.00

**B.**

Full Name (Last, First, Middle Initial)

David Hopkins

Mailing Address 15190 Yvonne Dr.

City

Morgan Hill

State

CA

Zip Code

95037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.11707

Amount of Each Receipt this Period

60.00

**C.**

Full Name (Last, First, Middle Initial)

David Hopkins

Mailing Address 15190 Yvonne Dr.

City

Morgan Hill

State

CA

Zip Code

95037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.12234

Amount of Each Receipt this Period

60.00

**SUBTOTAL** of Receipts This Page (optional) .....

180.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 69 / 288

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Craig Hyde

Mailing Address 6 Hastings Ln.

City

Old Lyme

State

CT

Zip Code

06371

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pfizer

Occupation

Biostatistician

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 5

Transaction ID: SA11AI.12249

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Emi Ireland

Mailing Address 4701 Sangamore Rd., 220N

City

Bethesda

State

MD

Zip Code

20816

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Campaign Advantage

Occupation

President

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 1 / 2 0 0 5

Transaction ID: SA11AI.9965

Amount of Each Receipt this Period

600.00

**C.**

Full Name (Last, First, Middle Initial)

Al Jordan

Mailing Address 10901 Lamplighter Ln.

City

Potomac

State

MD

Zip Code

20854

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Transparency LLC

Occupation

Operator

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 1 / 2 0 0 5

Transaction ID: SA11AI.11725

Amount of Each Receipt this Period

300.00

SUBTOTAL of Receipts This Page (optional) .....

950.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 70 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Kimberly Kennedy

Mailing Address 349 Burgoyne Rd.

City

Saratoga Springs

State

NY

Zip Code

12866

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Homemaker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 7 / 2 0 0 5

Transaction ID: SA11AI.11292

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

Kimberly Kennedy

Mailing Address 349 Burgoyne Rd.

City

Saratoga Springs

State

NY

Zip Code

12866

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Homemaker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 6 / 2 0 0 5

Transaction ID: SA11AI.11735

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Kimberly Kennedy

Mailing Address 349 Burgoyne Rd.

City

Saratoga Springs

State

NY

Zip Code

12866

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Homemaker

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 6 / 2 0 0 5

Transaction ID: SA11AI.12272

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

30.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 71 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Kimberly Kennedy

Mailing Address 349 Burgoyne Rd.

City

Saratoga Springs

State

NY

Zip Code

12866

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

Homemaker

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 9 / 2 0 0 5

Transaction ID: SA11AI.12273

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Mary Kennedy

Mailing Address c/o Entous  
16133 Ventura Blvd. #545

City

Encino

State

CA

Zip Code

91436

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Actress

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 0 5

Transaction ID: SA11AI.9303

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Mary Kennedy

Mailing Address c/o Entous  
16133 Ventura Blvd. #545

City

Encino

State

CA

Zip Code

91436

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Actress

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 6 / 2 0 0 5

Transaction ID: SA11AI.9986

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

125.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 72 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Mary Kennedy

Mailing Address c/o Entous

16133 Ventura Blvd. #545

City

Encino

State

CA

Zip Code

91436

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Actress

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 8 / 2 0 0 5

Transaction ID: SA11AI.9987

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Mary Kennedy

Mailing Address c/o Entous

16133 Ventura Blvd. #545

City

Encino

State

CA

Zip Code

91436

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Actress

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 5

Transaction ID: SA11AI.10704

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Mary Kennedy

Mailing Address c/o Entous

16133 Ventura Blvd. #545

City

Encino

State

CA

Zip Code

91436

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Actress

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 0 5

Transaction ID: SA11AI.11293

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 73 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Mary Kennedy

Mailing Address c/o Entous

16133 Ventura Blvd. #545

City

Encino

State

CA

Zip Code

91436

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Actress

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 5 / 2 0 0 5

Transaction ID: SA11AI.11736

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Mary Kennedy

Mailing Address c/o Entous

16133 Ventura Blvd. #545

City

Encino

State

CA

Zip Code

91436

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Actress

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 5 / 2 0 0 5

Transaction ID: SA11AI.12274

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Roselynn Kennedy

Mailing Address 48 Crary Ave.

City

Binghamton

State

NY

Zip Code

13905

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 5

Transaction ID: SA11AI.12275

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 74 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Satsatnam Khalsa

Mailing Address 1742 Whitewood Lane

City

Herndon

State

VA

Zip Code

20170

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Harvard University

Occupation  
Researcher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 4 / 2 0 0 5

Transaction ID: SA11AI.9304

Amount of Each Receipt this Period

54.00

**B.**

Full Name (Last, First, Middle Initial)

Evi Klett

Mailing Address 2037 S. Newton St.

City

Denver

State

CO

Zip Code

80219

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Denver Public Library

Occupation  
Librarian

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

237.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.9310

Amount of Each Receipt this Period

75.00

**C.**

Full Name (Last, First, Middle Initial)

Evi Klett

Mailing Address 2037 S. Newton St.

City

Denver

State

CO

Zip Code

80219

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Denver Public Library

Occupation  
Librarian

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 8 / 2 0 0 5

Transaction ID: SA11AI.10707

Amount of Each Receipt this Period

75.00

**SUBTOTAL** of Receipts This Page (optional) .....

204.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 75 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Evi Klett

Mailing Address 2037 S. Newton St.

City

Denver

State

CO

Zip Code

80219

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Denver Public Library

Occupation  
Librarian

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 1 / 2 0 0 5

Transaction ID: SA11AI.11739

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Evi Klett

Mailing Address 2037 S. Newton St.

City

Denver

State

CO

Zip Code

80219

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Denver Public Library

Occupation  
Librarian

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

437.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 8 / 2 0 0 5

Transaction ID: SA11AI.12277

Amount of Each Receipt this Period

75.00

**C.**

Full Name (Last, First, Middle Initial)

Martha Koester

Mailing Address 10015 Second Ave. S

City

Seattle

State

WA

Zip Code

98168

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Weyergaeyser

Occupation  
Chemist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 0 5

Transaction ID: SA11AI.9314

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 76 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Martha Koester

Mailing Address 10015 Second Ave. S

City

Seattle

State

WA

Zip Code

98168

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Weyergaeyser

Occupation  
Chemist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

386.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.9315

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

Martha Koester

Mailing Address 10015 Second Ave. S

City

Seattle

State

WA

Zip Code

98168

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Weyergaeyser

Occupation  
Chemist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

406.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 1 / 2 0 0 5

Transaction ID: SA11AI.11742

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

Martha Koester

Mailing Address 10015 Second Ave. S

City

Seattle

State

WA

Zip Code

98168

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Weyergaeyser

Occupation  
Chemist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 1 / 2 0 0 5

Transaction ID: SA11AI.12282

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional) .....

60.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 77 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Margaret Koren

Mailing Address 923 Foothill Dr.

City

Windsor

State

CA

Zip Code

95492

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 5 / 2 0 0 5

Transaction ID: SA11AI.9316

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Margaret Koren

Mailing Address 923 Foothill Dr.

City

Windsor

State

CA

Zip Code

95492

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 6 / 2 0 0 5

Transaction ID: SA11AI.10005

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Margaret Koren

Mailing Address 923 Foothill Dr.

City

Windsor

State

CA

Zip Code

95492

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.10709

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 78 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Margaret Koren

Mailing Address 923 Foothill Dr.

City

Windsor

State

CA

Zip Code

95492

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.11296

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Margaret Koren

Mailing Address 923 Foothill Dr.

City

Windsor

State

CA

Zip Code

95492

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.11743

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Margaret Koren

Mailing Address 923 Foothill Dr.

City

Windsor

State

CA

Zip Code

95492

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.12283

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 79 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Emmanuel Krasner

Mailing Address 31 Reservoir Rd.

City

Farmington

State

NH

Zip Code

03835

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Krasner Law Office

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.12286

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Corbett Kroehler

Mailing Address 5104 Stratemeyer Dr.

City

Orlando

State

FL

Zip Code

32839

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Suntrust Bank

Occupation  
Web Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 4 / 2 0 0 5

Transaction ID: SA11AI.9324

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Corbett Kroehler

Mailing Address 5104 Stratemeyer Dr.

City

Orlando

State

FL

Zip Code

32839

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Suntrust Bank

Occupation  
Web Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

265.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.10007

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 80 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Corbett Kroehler

Mailing Address 5104 Stratemeyer Dr.

City

Orlando

State

FL

Zip Code

32839

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Suntrust Bank

Occupation

Web Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 2 / 2 0 0 5

Transaction ID: SA11AI.10712

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

Corbett Kroehler

Mailing Address 5104 Stratemeyer Dr.

City

Orlando

State

FL

Zip Code

32839

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Suntrust Bank

Occupation

Web Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.10713

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Corbett Kroehler

Mailing Address 5104 Stratemeyer Dr.

City

Orlando

State

FL

Zip Code

32839

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Suntrust Bank

Occupation

Web Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.11299

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

65.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 81 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Corbett Kroehler

Mailing Address 5104 Stratemeyer Dr.

City

Orlando

State

FL

Zip Code

32839

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Suntrust Bank

Occupation

Web Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.11747

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Corbett Kroehler

Mailing Address 5104 Stratemeyer Dr.

City

Orlando

State

FL

Zip Code

32839

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Suntrust Bank

Occupation

Web Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.12288

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Joseph Labonte

Mailing Address 1415 Jordan Ave.

City

Provo

State

UT

Zip Code

84604

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Truck Driver

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 7 / 2 0 0 5

Transaction ID: SA11AI.10717

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 82 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Joseph Labonte

Mailing Address 1415 Jordan Ave.

City

Provo

State

UT

Zip Code

84604

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Truck Driver

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 7 / 2 0 0 5

Transaction ID: SA11AI.10719

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Lillian Laskin

Mailing Address 3145 Coolidge Ave.

City

Los Angeles

State

CA

Zip Code

90066

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.9334

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

Lillian Laskin

Mailing Address 3145 Coolidge Ave.

City

Los Angeles

State

CA

Zip Code

90066

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 0 6 / 2 0 0 5

Transaction ID: SA11AI.10019

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional) .....

90.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 83 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Lillian Laskin

Mailing Address 3145 Coolidge Ave.

City

Los Angeles

State

CA

Zip Code

90066

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 8 / 2 0 0 5

Transaction ID: SA11AI.10020

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

Lillian Laskin

Mailing Address 3145 Coolidge Ave.

City

Los Angeles

State

CA

Zip Code

90066

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 5

Transaction ID: SA11AI.10726

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

Lillian Laskin

Mailing Address 3145 Coolidge Ave.

City

Los Angeles

State

CA

Zip Code

90066

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

340.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 0 5

Transaction ID: SA11AI.11309

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional) .....

60.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 84 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Lillian Laskin

Mailing Address 3145 Coolidge Ave.

City

Los Angeles

State

CA

Zip Code

90066

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 5 / 2 0 0 5

Transaction ID: SA11AI.11753

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

Lillian Laskin

Mailing Address 3145 Coolidge Ave.

City

Los Angeles

State

CA

Zip Code

90066

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 5 / 2 0 0 5

Transaction ID: SA11AI.12298

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

Jeffrey L. Latas

Mailing Address 1402 Placita Meseta Dorada

City

Oro Valley

State

AZ

Zip Code

85755

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Jetblue

Occupation  
Pilot

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 6 / 2 0 0 5

Transaction ID: SA11AI.11755

Amount of Each Receipt this Period

500.00

**SUBTOTAL** of Receipts This Page (optional) .....

540.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 85 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Eleanore Lee

Mailing Address 2560 Hilgard Ave.

City

Berkeley

State

CA

Zip Code

94709

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Univ. of California

Occupation

Policy Analyst

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 5

Transaction ID: SA11AI.10730

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Terry L. Lierman

Mailing Address 7200 Delfield St.

City

Chevy Chase

State

MD

Zip Code

20815

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Maryland Democratic Party

Occupation

Chair

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 5

Transaction ID: SA11AI.11765

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Michele Liu

Mailing Address PO Box 4386

City

Foster City

State

CA

Zip Code

94404

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Lawyer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 4 / 2 0 0 5

Transaction ID: SA11AI.9349

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

1100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 86 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Michele Liu

Mailing Address PO Box 4386

City

State

Zip Code

Foster City

CA

94404

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Lawyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.10042

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Michele Liu

Mailing Address PO Box 4386

City

State

Zip Code

Foster City

CA

94404

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Lawyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 1 / 2 0 0 5

Transaction ID: SA11AI.10743

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Michele Liu

Mailing Address PO Box 4386

City

State

Zip Code

Foster City

CA

94404

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Lawyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 1 / 2 0 0 5

Transaction ID: SA11AI.11322

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 87 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Michele Liu

Mailing Address PO Box 4386

City

State

Zip Code

Foster City

CA

94404

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Lawyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 1 / 2 0 0 5

Transaction ID: SA11AI.11771

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Michele Liu

Mailing Address PO Box 4386

City

State

Zip Code

Foster City

CA

94404

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Lawyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 1 / 2 0 0 5

Transaction ID: SA11AI.12312

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Joan Magit

Mailing Address 17327 Marilla St.

City

State

Zip Code

Northridge

CA

91325

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
RN, NP

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 9 / 2 0 0 5

Transaction ID: SA11AI.10758

Amount of Each Receipt this Period

300.00

**SUBTOTAL** of Receipts This Page (optional) .....

400.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 88 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Kevin McCaffrey

Mailing Address 160 N. Hills Dr.

City

Parkersburg

State

WV

Zip Code

26104

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Parsons Transportation

Occupation

Group Researcher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

658.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 9 / 2 0 0 5

Transaction ID: SA11AI.10771

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Stephen McClure

Mailing Address 4155 E. La Cienega Dr.

City

Tucson

State

AZ

Zip Code

85712

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Duffield Young Adamson

Occupation

Lawyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 8 / 2 0 0 5

Transaction ID: SA11AI.11791

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Stephen McClure

Mailing Address 4155 E. La Cienega Dr.

City

Tucson

State

AZ

Zip Code

85712

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Duffield Young Adamson

Occupation

Lawyer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 8 / 2 0 0 5

Transaction ID: SA11AI.12336

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 89 / 288

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

S. McFadden

Mailing Address 1124 E. Timber Ridge Rd.

City

Prescott

State

AZ

Zip Code

86303

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Writer/Editor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 4 / 2 0 0 5

Transaction ID: SA11AI.9378

Amount of Each Receipt this Period

350.00

**B.**

Full Name (Last, First, Middle Initial)

Huel Meadows

Mailing Address 9103 Green Rd.

City

Warrentown

State

VA

Zip Code

20187

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired - US Government

Occupation

Personnel-labor/employee rel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.11345

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

Huel Meadows

Mailing Address 9103 Green Rd.

City

Warrentown

State

VA

Zip Code

20187

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired - US Government

Occupation

Personnel-labor/employee rel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 1 / 2 0 0 5

Transaction ID: SA11AI.11800

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional) .....

390.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 90 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Huel Meadows

Mailing Address 9103 Green Rd.

City

Warrentown

State

VA

Zip Code

20187

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired - US Government

Occupation

Personnel-labor/employee rel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.11801

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

Huel Meadows

Mailing Address 9103 Green Rd.

City

Warrentown

State

VA

Zip Code

20187

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired - US Government

Occupation

Personnel-labor/employee rel

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.12341

Amount of Each Receipt this Period

15.00

**C.**

Full Name (Last, First, Middle Initial)

John Miller

Mailing Address 531 Main St. #525

City

New York

State

NY

Zip Code

10044

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.9401

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

55.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 91 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

John Miller

Mailing Address 531 Main St. #525

City

New York

State

NY

Zip Code

10044

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 6 / 2 0 0 5

Transaction ID: SA11AI.10104

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

John Miller

Mailing Address 531 Main St. #525

City

New York

State

NY

Zip Code

10044

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 8 / 2 0 0 5

Transaction ID: SA11AI.10105

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

John Miller

Mailing Address 531 Main St. #525

City

New York

State

NY

Zip Code

10044

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

319.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 5

Transaction ID: SA11AI.10792

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 92 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

John Miller

Mailing Address 531 Main St. #525

City

New York

State

NY

Zip Code

10044

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

344.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 5 / 2 0 0 5

Transaction ID: SA11AI.11349

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

John Miller

Mailing Address 531 Main St. #525

City

New York

State

NY

Zip Code

10044

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 5 / 2 0 0 5

Transaction ID: SA11AI.11810

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

John Miller

Mailing Address 531 Main St. #525

City

New York

State

NY

Zip Code

10044

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 5 / 2 0 0 5

Transaction ID: SA11AI.12347

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 93 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

George Mitchell

Mailing Address 7925 Sersmith Dr.

City

Cumming

State

GA

Zip Code

30040

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Paint Contractor

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 8 / 2 0 0 5

Transaction ID: SA11AI.11812

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

George Mitchell

Mailing Address 7925 Sersmith Dr.

City

Cumming

State

GA

Zip Code

30040

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Paint Contractor

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 8 / 2 0 0 5

Transaction ID: SA11AI.12352

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Bill Moyer

Mailing Address PO Box 278

City

Vashon

State

WA

Zip Code

98070

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

None

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 3 / 2 0 0 5

Transaction ID: SA11AI.10807

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 94 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Carolyn Newhouse

Mailing Address 46 Hollow Brook Rd.

City

Pottersville

State

NJ

Zip Code

07979

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Artist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 2 8 / 2 0 0 5

Transaction ID: SA11AI.12357

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

Meg O'Shaughnessy

Mailing Address 41621 Reds Rd.

City

Paonia

State

CO

Zip Code

81428

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Radio Producer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 5

Transaction ID: SA11AI.11830

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

Dennis K Obduskey

Mailing Address PO Box 697

City

Pine

State

CO

Zip Code

80421

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Denver Investment Advisors  
LLC

Occupation  
Department Manager

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 2 0 / 2 0 0 5

Transaction ID: SA11AI.12367

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional) .....

245.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 95 / 288

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Dennis K Obduskey

Mailing Address PO Box 697

City

Pine

State

CO

Zip Code

80421

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Denver Investment Advisors  
LLC

Occupation

Department Manager

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 7 / 2 0 0 5

Transaction ID: SA11AI.12368

Amount of Each Receipt this Period

15.00

**B.**

Full Name (Last, First, Middle Initial)

Johanna Olson

Mailing Address 11042 Camrillo St. #9

City

North Hollywood

State

CA

Zip Code

91602

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ELCA

Occupation

Asst. for Disaster Response

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 8 / 2 0 0 5

Transaction ID: SA11AI.11837

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Johanna Olson

Mailing Address 11042 Camrillo St. #9

City

North Hollywood

State

CA

Zip Code

91602

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ELCA

Occupation

Asst. for Disaster Response

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 8 / 2 0 0 5

Transaction ID: SA11AI.12369

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional) .....

65.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 96 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Christopher Owens

Mailing Address 328 Flatbush Ave., #271

City

Brooklyn

State

NY

Zip Code

11238

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AeriChoice

Occupation

Dir. of Market Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 0 5

Transaction ID: SA11AI.9430

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Christopher Owens

Mailing Address 328 Flatbush Ave., #271

City

Brooklyn

State

NY

Zip Code

11238

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AeriChoice

Occupation

Dir. of Market Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 5 / 2 0 0 5

Transaction ID: SA11AI.10141

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Christopher Owens

Mailing Address 328 Flatbush Ave., #271

City

Brooklyn

State

NY

Zip Code

11238

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AeriChoice

Occupation

Dir. of Market Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 4 / 2 0 0 5

Transaction ID: SA11AI.10142

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 97 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Christopher Owens

Mailing Address 328 Flatbush Ave., #271

City

Brooklyn

State

NY

Zip Code

11238

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AeriChoice

Occupation

Dir. of Market Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 2 / 2 0 0 5

Transaction ID: SA11AI.10829

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Christopher Owens

Mailing Address 328 Flatbush Ave., #271

City

Brooklyn

State

NY

Zip Code

11238

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AeriChoice

Occupation

Dir. of Market Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 2 / 2 0 0 5

Transaction ID: SA11AI.11372

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Christopher Owens

Mailing Address 328 Flatbush Ave., #271

City

Brooklyn

State

NY

Zip Code

11238

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AeriChoice

Occupation

Dir. of Market Development

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 2 / 2 0 0 5

Transaction ID: SA11AI.11839

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 98 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Christopher Owens

Mailing Address 328 Flatbush Ave., #271

City

Brooklyn

State

NY

Zip Code

11238

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AeriChoice

Occupation

Dir. of Market Development

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 2 / 2 0 0 5

Transaction ID: SA11AI.12371

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

David K. Pantalone

Mailing Address 19 Alton Place #1

City

Brookline

State

MA

Zip Code

02446

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
National Grid

Occupation

Engineer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 7 / 2 0 0 5

Transaction ID: SA11AI.11840

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

David K. Pantalone

Mailing Address 19 Alton Place #1

City

Brookline

State

MA

Zip Code

02446

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
National Grid

Occupation

Engineer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 9 / 2 0 0 5

Transaction ID: SA11AI.12374

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

275.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 99 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Arden D. Parker

Mailing Address PO Box 76737

City

Washington

State

DC

Zip Code

20013

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Pennacchio for Pennsylvan-  
ia

Occupation

Communications

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.11841

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Wayne Parton

Mailing Address 1797 Wilshire Lane

City

Decatur

State

GA

Zip Code

30023

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Psychiatrists Only

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 1 / 2 0 0 5

Transaction ID: SA11AI.11374

Amount of Each Receipt this Period

35.00

**C.**

Full Name (Last, First, Middle Initial)

Wayne Parton

Mailing Address 1797 Wilshire Lane

City

Decatur

State

GA

Zip Code

30023

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Psychiatrists Only

Occupation

Executive

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 1 / 2 0 0 5

Transaction ID: SA11AI.11844

Amount of Each Receipt this Period

35.00

**SUBTOTAL** of Receipts This Page (optional) .....

320.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 100 / 288

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Wayne Parton

Mailing Address 1797 Wilshire Lane

City

Decatur

State

GA

Zip Code

30023

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Psychiatrists Only

Occupation

Executive

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 1 / 2 0 0 5

Transaction ID: SA11AI.12377

Amount of Each Receipt this Period

35.00

**B.**

Full Name (Last, First, Middle Initial)

Larry Patterson

Mailing Address 3000 Sassafra Tree Ct.

City

Dumfries

State

VA

Zip Code

22026

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
US Civil Service

Occupation

Systems Programmer

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

200.05

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 6 / 2 0 0 5

Transaction ID: SA11AI.11375

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Larry Patterson

Mailing Address 3000 Sassafra Tree Ct.

City

Dumfries

State

VA

Zip Code

22026

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
US Civil Service

Occupation

Systems Programmer

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

225.05

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 6 / 2 0 0 5

Transaction ID: SA11AI.11845

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional) .....

85.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 101 / 288

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Larry Patterson

Mailing Address 3000 Sassafra Tree Ct.

City

Dumfries

State

VA

Zip Code

22026

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
US Civil Service

Occupation

Systems Programmer

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

325.05

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 2 1 / 2 0 0 5

Transaction ID: SA11AI.12379

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Larry Patterson

Mailing Address 3000 Sassafra Tree Ct.

City

Dumfries

State

VA

Zip Code

22026

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
US Civil Service

Occupation

Systems Programmer

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

350.05

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 2 6 / 2 0 0 5

Transaction ID: SA11AI.12380

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Linda Patterson

Mailing Address 10 Brookleaze Buildings  
Larkhall

City

Bath XX BA1 6RA

State

ZZ

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JLP Enterprises

Occupation

Consultant

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 1 0 / 2 0 0 5

Transaction ID: SA11AI.10837

Amount of Each Receipt this Period

35.00

SUBTOTAL of Receipts This Page (optional) .....

160.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 102 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Linda Patterson

Mailing Address 10 Brookleaze Buildings  
Larkhall

City State Zip Code

Bath XX BA1 6RA

ZZ

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JLP Enterprises

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 7 / 2 0 0 5

Transaction ID: SA11AI.11376

Amount of Each Receipt this Period

35.00

**B.**

Full Name (Last, First, Middle Initial)

Linda Patterson

Mailing Address 10 Brookleaze Buildings  
Larkhall

City State Zip Code

Bath XX BA1 6RA

ZZ

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JLP Enterprises

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 7 / 2 0 0 5

Transaction ID: SA11AI.11846

Amount of Each Receipt this Period

35.00

**C.**

Full Name (Last, First, Middle Initial)

Linda Patterson

Mailing Address 10 Brookleaze Buildings  
Larkhall

City State Zip Code

Bath XX BA1 6RA

ZZ

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JLP Enterprises

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 7 / 2 0 0 5

Transaction ID: SA11AI.12381

Amount of Each Receipt this Period

35.00

**SUBTOTAL** of Receipts This Page (optional) .....

105.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 103 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Pamela Paul

Mailing Address 3624 Linda Ave.

City

Oklahoma City

State

OK

Zip Code

73112

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Landlord

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 1 / 2 0 0 5

Transaction ID: SA11AI.11848

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Jack Payne

Mailing Address 2203 East Dinuba Ave.

City

Fresno

State

CA

Zip Code

93725

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Nova Fuels

Occupation  
Director of Operations

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 9 / 2 0 0 5

Transaction ID: SA11AI.12383

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Palmer Peterson

Mailing Address 475 Sycamore Lane Apt. 101

City

Aurora

State

OH

Zip Code

44202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Weather Forecast, Inc.

Occupation  
Meterologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 8 / 2 0 0 5

Transaction ID: SA11AI.10842

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional) .....

180.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 104 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Palmer Peterson

Mailing Address 475 Sycamore Lane Apt. 101

City State Zip Code  
Aurora OH 44202

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Weather Forecast, Inc.

Occupation  
Meterologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 8 / 2 0 0 5

Transaction ID: SA11AI.11380

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

Palmer Peterson

Mailing Address 475 Sycamore Lane Apt. 101

City State Zip Code  
Aurora OH 44202

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Weather Forecast, Inc.

Occupation  
Meterologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 8 / 2 0 0 5

Transaction ID: SA11AI.11852

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

Palmer Peterson

Mailing Address 475 Sycamore Lane Apt. 101

City State Zip Code  
Aurora OH 44202

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Weather Forecast, Inc.

Occupation  
Meterologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 8 / 2 0 0 5

Transaction ID: SA11AI.12384

Amount of Each Receipt this Period

30.00

**SUBTOTAL** of Receipts This Page (optional) .....

90.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 105 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Palmer Peterson

Mailing Address 475 Sycamore Lane Apt. 101

City State Zip Code  
 Aurora OH 44202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Weather Forecast, Inc.

Occupation  
Meteorologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 2 / 2 8 / 2 0 0 5

Transaction ID: SA11AI.12385

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Thomas Plaut

Mailing Address 125 Red Gate Lane

City State Zip Code  
 Amherst MA 01002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 9 / 1 2 / 2 0 0 5

Transaction ID: SA11AI.10846

Amount of Each Receipt this Period

35.00

**C.**

Full Name (Last, First, Middle Initial)

Thomas Plaut

Mailing Address 125 Red Gate Lane

City State Zip Code  
 Amherst MA 01002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1535.00

Date of Receipt

M M / D D / Y Y Y Y  
 1 2 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.12392

Amount of Each Receipt this Period

1000.00

**SUBTOTAL** of Receipts This Page (optional) .....

1060.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 106 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Alta Price

Mailing Address 4888 School House Rd.

City

State

Zip Code

Bettendorf

IA

52722

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Metropolitan Medical Lab.

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 8 / 2 0 0 5

Transaction ID: SA11AI.11863

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Alta Price

Mailing Address 4888 School House Rd.

City

State

Zip Code

Bettendorf

IA

52722

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Metropolitan Medical Lab.

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 8 / 2 0 0 5

Transaction ID: SA11AI.12397

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Alta Price

Mailing Address 4888 School House Rd.

City

State

Zip Code

Bettendorf

IA

52722

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Metropolitan Medical Lab.

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 0 / 2 0 0 5

Transaction ID: SA11AI.12398

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

100.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 107 / 288

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Jamin Raskin

Mailing Address 7209 Holly Ave.

City

Takoma Park

State

MD

Zip Code

20912

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
American University

Occupation

Law Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.11869

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Steven Ravitz

Mailing Address 1632 N. Hermitage Rd.

City

Fort Myers

State

FL

Zip Code

33919

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Coastal Health

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 3 / 2 0 0 5

Transaction ID: SA11AI.12405

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Mervis Reissig

Mailing Address 4222 Primrose Ave.

City

Santa Rosa

State

CA

Zip Code

95407

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Project Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 1 / 2 0 0 5

Transaction ID: SA11AI.10187

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional) .....

375.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 108 / 288

(check only one)

<input checked="checked" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
--	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Mervis Reissig

Mailing Address 4222 Primrose Ave.

City

Santa Rosa

State

CA

Zip Code

95407

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Project Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 1 / 2 0 0 5

Transaction ID: SA11AI.10188

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Mervis Reissig

Mailing Address 4222 Primrose Ave.

City

Santa Rosa

State

CA

Zip Code

95407

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Project Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 7 / 2 0 0 5

Transaction ID: SA11AI.10861

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Mervis Reissig

Mailing Address 4222 Primrose Ave.

City

Santa Rosa

State

CA

Zip Code

95407

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Project Leader

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 5

Transaction ID: SA11AI.10862

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional) .....

100.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 109 / 288

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Mervis Reissig

Mailing Address 4222 Primrose Ave.

City

Santa Rosa

State

CA

Zip Code

95407

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Project Leader

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 1 / 2 0 0 5

Transaction ID: SA11AI.10863

Amount of Each Receipt this Period

35.00

**B.**

Full Name (Last, First, Middle Initial)

Roberta Richardson

Mailing Address 853 Stiles Dr.

City

Evergreen

State

CO

Zip Code

80439

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Physician

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.9458

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Roberta Richardson

Mailing Address 853 Stiles Dr.

City

Evergreen

State

CO

Zip Code

80439

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Physician

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 6 / 2 0 0 5

Transaction ID: SA11AI.10867

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional) .....

135.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 110 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Roberta Richardson

Mailing Address 853 Stiles Dr.

City

Evergreen

State

CO

Zip Code

80439

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 6 / 2 0 0 5

Transaction ID: SA11AI.12417

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Roberta Richardson

Mailing Address 853 Stiles Dr.

City

Evergreen

State

CO

Zip Code

80439

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 0 / 2 0 0 5

Transaction ID: SA11AI.12418

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

Frederick Rieck

Mailing Address 5210 S. Caballo Rd.

City

Tucson

State

AZ

Zip Code

85746

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 6 / 2 0 0 5

Transaction ID: SA11AI.11875

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

85.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 111 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Frederick Rieck

Mailing Address 5210 S. Caballo Rd.

City

Tucson

State

AZ

Zip Code

85746

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 1 / 2 0 0 5

Transaction ID: SA11AI.12419

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Frederick Rieck

Mailing Address 5210 S. Caballo Rd.

City

Tucson

State

AZ

Zip Code

85746

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 6 / 2 0 0 5

Transaction ID: SA11AI.12420

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

George Ripley

Mailing Address 1425 Monroe St. NW

City

Washington

State

DC

Zip Code

20010

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Social Activist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 1 / 2 0 0 5

Transaction ID: SA11AI.11876

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional) .....

275.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 112 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

James Robinson

Mailing Address 8710 Timber Oak Lane

City

Laurel

State

MD

Zip Code

20723

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 3 / 2 0 0 5

Transaction ID: SA11AI.10875

Amount of Each Receipt this Period

10.00

**B.**

Full Name (Last, First, Middle Initial)

James Robinson

Mailing Address 8710 Timber Oak Lane

City

Laurel

State

MD

Zip Code

20723

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

410.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 3 / 2 0 0 5

Transaction ID: SA11AI.12422

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Alan Rollins

Mailing Address 2833 Green Forrest Ln.

City

Tallahassee

State

FL

Zip Code

32312

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 2 / 2 0 0 5

Transaction ID: SA11AI.12426

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

135.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 113 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Marianne Romans

Mailing Address 5330 N. Central #14

City

Phoenix

State

AZ

Zip Code

85012

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Midwife

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 8 / 2 0 0 5

Transaction ID: SA11AI.12428

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

James Rosenau

Mailing Address 955 26th St. NW  
Apt. 901

City

Washington

State

DC

Zip Code

20037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
George Washington Univers-  
ity

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 2 / 2 0 0 5

Transaction ID: SA11AI.11886

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

James Rosenau

Mailing Address 955 26th St. NW  
Apt. 901

City

Washington

State

DC

Zip Code

20037

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
George Washington Univers-  
ity

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 2 / 2 0 0 5

Transaction ID: SA11AI.12429

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 114 / 288

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Charlotte Roybal

Mailing Address 27 Calle Varada

City

Santa Fe

State

NM

Zip Code

87507

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Health Action Nm.Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

284.90

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 4 / 2 0 0 5

Transaction ID: SA11AI.9477

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Charlotte Roybal

Mailing Address 27 Calle Varada

City

Santa Fe

State

NM

Zip Code

87507

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Health Action Nm.Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.90

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 9 / 2 0 0 5

Transaction ID: SA11AI.10889

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Charlotte Roybal

Mailing Address 27 Calle Varada

City

Santa Fe

State

NM

Zip Code

87507

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Health Action Nm.Occupation  
Director

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

484.90

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 8 / 2 0 0 5

Transaction ID: SA11AI.12434

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) .....

300.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Scott Ruffner

Mailing Address PO Box 1867

City

Bangor

State

ME

Zip Code

04402

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Realtor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 5 / 2 0 0 5

Transaction ID: SA11AI.9478

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Scott Ruffner

Mailing Address PO Box 1867

City

Bangor

State

ME

Zip Code

04402

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Realtor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 6 / 2 0 0 5

Transaction ID: SA11AI.10222

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Scott Ruffner

Mailing Address PO Box 1867

City

Bangor

State

ME

Zip Code

04402

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Realtor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.90

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 2 / 2 0 0 5

Transaction ID: SA11AI.10892

Amount of Each Receipt this Period

34.90

**SUBTOTAL** of Receipts This Page (optional) .....

84.90

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Scott Ruffner

Mailing Address PO Box 1867

City

Bangor

State

ME

Zip Code

04402

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Realtor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.90

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.10893

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Scott Ruffner

Mailing Address PO Box 1867

City

Bangor

State

ME

Zip Code

04402

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Realtor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

378.90

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 2 / 2 0 0 5

Transaction ID: SA11AI.10894

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Scott Ruffner

Mailing Address PO Box 1867

City

Bangor

State

ME

Zip Code

04402

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Realtor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

403.90

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.11415

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 117 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Scott Ruffner

Mailing Address PO Box 1867

City

Bangor

State

ME

Zip Code

04402

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Realtor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

428.90

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.11890

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Scott Ruffner

Mailing Address PO Box 1867

City

Bangor

State

ME

Zip Code

04402

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Realtor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

453.90

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.12435

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Russ Savit

Mailing Address 250 Northwest Blvd. #202

City

Coeur D Alene

State

ID

Zip Code

83814

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 0 5

Transaction ID: SA11AI.9486

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 118 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Nancy G. Schaub

Mailing Address 1 Tunitas Creek Ranch Rd.

City

Half Moon Bay

State

CA

Zip Code

94019

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 1 / 2 0 0 5

Transaction ID: SA11AI.11899

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Lee Schilling

Mailing Address 1671 W. Morris Ave.

City

Fresno

State

CA

Zip Code

93711

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
Physician

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 5 / 2 0 0 5

Transaction ID: SA11AI.10908

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Edwin Selby

Mailing Address PO Box 627

City

Sussex

State

NJ

Zip Code

07461

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Educational Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 1 0 / 2 0 0 5

Transaction ID: SA11AI.12446

Amount of Each Receipt this Period

10.00

**SUBTOTAL** of Receipts This Page (optional) .....

1110.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 119 / 288

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Edwin Selby

Mailing Address PO Box 627

City

Sussex

State

NJ

Zip Code

07461

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Educational Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 0 / 2 0 0 5

Transaction ID: SA11AI.12447

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

Stephen Shaff

Mailing Address 3605 Perry St.

City

Mt. Rainier

State

MD

Zip Code

20712

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Community-Vision Consulta-  
nts

Occupation

Community Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 2 / 2 0 0 5

Transaction ID: SA11AI.10915

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Stephen Shaff

Mailing Address 3605 Perry St.

City

Mt. Rainier

State

MD

Zip Code

20712

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Community-Vision Consulta-  
nts

Occupation

Community Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

269.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 8 / 2 0 0 5

Transaction ID: SA11AI.11423

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional) .....

95.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 120 / 288

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Stephen Shaff

Mailing Address 3605 Perry St.

City

Mt. Rainier

State

MD

Zip Code

20712

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Community-Vision Consulta-  
nts

Occupation

Community Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

294.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 7 / 2 0 0 5

Transaction ID: SA11AI.11916

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Stephen Shaff

Mailing Address 3605 Perry St.

City

Mt. Rainier

State

MD

Zip Code

20712

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Community-Vision Consulta-  
nts

Occupation

Community Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5094.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 9 / 2 0 0 5

Transaction ID: SA11AI.11917

Amount of Each Receipt this Period

4800.00

**C.**

Full Name (Last, First, Middle Initial)

Stephen Shaff

Mailing Address 3605 Perry St.

City

Mt. Rainier

State

MD

Zip Code

20712

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Community-Vision Consulta-  
nts

Occupation

Community Developer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5119.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 7 / 2 0 0 5

Transaction ID: SA11AI.12448

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional) .....

4850.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 121 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

A. Shallal

Mailing Address 8461 Chapelwood Ct.

City

Annandale

State

VA

Zip Code

22003

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Artist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 2 / 2 0 0 5

Transaction ID: SA11AI.11918

Amount of Each Receipt this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Stanley Shapiro

Mailing Address 7213 Cresheim Rd.

City

Philadelphia

State

PA

Zip Code

19119

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Dentist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.9501

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Stanley Shapiro

Mailing Address 7213 Cresheim Rd.

City

Philadelphia

State

PA

Zip Code

19119

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Dentist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 5 / 2 0 0 5

Transaction ID: SA11AI.10253

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

1100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 122 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Stanley Shapiro

Mailing Address 7213 Cresheim Rd.

City

Philadelphia

State

PA

Zip Code

19119

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Dentist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 8 / 2 0 0 5

Transaction ID: SA11AI.10254

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Cynthia Sherbin

Mailing Address 18 Stoneybrook Lane

City

Malvern

State

PA

Zip Code

19355

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 5

Transaction ID: SA11AI.12451

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

John Sherman

Mailing Address 602 Wheelock Pkwy W

City

St. Paul

State

MN

Zip Code

55117

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Unknown

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.9505

Amount of Each Receipt this Period

15.00

**SUBTOTAL** of Receipts This Page (optional) .....

265.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 123 / 288

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

John Sherman

Mailing Address 602 Wheelock Pkwy W

City

St. Paul

State

MN

Zip Code

55117

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UnknownOccupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.11924

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Robert Shragg

Mailing Address 16101 Sunset Blvd. #305

City

Pacific Palisades

State

CA

Zip Code

90275

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 5 / 2 0 0 5

Transaction ID: SA11AI.10266

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Robert Shragg

Mailing Address 16101 Sunset Blvd. #305

City

Pacific Palisades

State

CA

Zip Code

90275

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 4 / 2 0 0 5

Transaction ID: SA11AI.10267

Amount of Each Receipt this Period

25.00

SUBTOTAL of Receipts This Page (optional) .....

75.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 124 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Robert Shragg

Mailing Address 16101 Sunset Blvd. #305

City

Pacific Palisades

State

CA

Zip Code

90275

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 3 / 2 0 0 5

Transaction ID: SA11AI.10926

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Robert Shragg

Mailing Address 16101 Sunset Blvd. #305

City

Pacific Palisades

State

CA

Zip Code

90275

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 3 / 2 0 0 5

Transaction ID: SA11AI.11430

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Robert Shragg

Mailing Address 16101 Sunset Blvd. #305

City

Pacific Palisades

State

CA

Zip Code

90275

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 3 / 2 0 0 5

Transaction ID: SA11AI.11925

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 125 / 288

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Robert Shragg

Mailing Address 16101 Sunset Blvd. #305

City

Pacific Palisades

State

CA

Zip Code

90275

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RetiredOccupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 2 3 / 2 0 0 5

Transaction ID: SA11AI.12453

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Carol Simonet

Mailing Address 5536 Foxtail Loop

City

Carlsbad

State

CA

Zip Code

92008

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.10273

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

Carol Simonet

Mailing Address 5536 Foxtail Loop

City

Carlsbad

State

CA

Zip Code

92008

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 9 / 2 1 / 2 0 0 5

Transaction ID: SA11AI.10928

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional) .....

65.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 126 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Carol Simonet

Mailing Address 5536 Foxtail Loop

City

Carlsbad

State

CA

Zip Code

92008

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 9 / 2 0 0 5

Transaction ID: SA11AI.11432

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

Carol Simonet

Mailing Address 5536 Foxtail Loop

City

Carlsbad

State

CA

Zip Code

92008

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 9 / 2 0 0 5

Transaction ID: SA11AI.11928

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

Carol Simonet

Mailing Address 5536 Foxtail Loop

City

Carlsbad

State

CA

Zip Code

92008

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 9 / 2 0 0 5

Transaction ID: SA11AI.12454

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional) .....

60.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 127 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

David Simpkin

Mailing Address 40 Old Bridge St. N

City

Pelham

State

NH

Zip Code

03076

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Car Component Technologies  
Inc

Occupation

Truck Driver

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 5

Transaction ID: SA11AI.11929

Amount of Each Receipt this Period

40.00

**B.**

Full Name (Last, First, Middle Initial)

David Simpkin

Mailing Address 40 Old Bridge St. N

City

Pelham

State

NH

Zip Code

03076

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Car Component Technologies  
Inc

Occupation

Truck Driver

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 5 / 2 0 0 5

Transaction ID: SA11AI.12455

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)

Benjamin Slade

Mailing Address 3000 Tilden St. NW, Apt. 403

City

Washington

State

DC

Zip Code

20008

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Software Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 1 / 2 0 0 5

Transaction ID: SA11AI.11932

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

330.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 128 / 288

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Nathaniel Smith

Mailing Address 308 S. Walnut St.

City

West Chester

State

PA

Zip Code

19382

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Franklin

Occupation

Academic Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

207.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 6 / 2 0 0 5

Transaction ID: SA11AI.10279

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

Nathaniel Smith

Mailing Address 308 S. Walnut St.

City

West Chester

State

PA

Zip Code

19382

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Franklin

Occupation

Academic Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

257.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 5 / 2 0 0 5

Transaction ID: SA11AI.10939

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Nathaniel Smith

Mailing Address 308 S. Walnut St.

City

West Chester

State

PA

Zip Code

19382

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Franklin

Occupation

Academic Administrator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 2 / 2 0 0 5

Transaction ID: SA11AI.10940

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional) .....

250.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 129 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Todd M. Smyth

Mailing Address 5900B Coverdale Way

City

Alexandria

State

VA

Zip Code

22310

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Engle Group

Occupation

Instructional Designer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 2 7 / 2 0 0 5

Transaction ID: SA11AI.11936

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Todd M. Smyth

Mailing Address 5900B Coverdale Way

City

Alexandria

State

VA

Zip Code

22310

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Engle Group

Occupation

Instructional Designer

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 2 7 / 2 0 0 5

Transaction ID: SA11AI.12461

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Doris Southern

Mailing Address 235 Gundry Dr.

City

Falls Church

State

VA

Zip Code

22046

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
US Dept. of State

Occupation

Inventory Management Specialist

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 0 9 / 2 0 0 5

Transaction ID: SA11AI.11439

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

225.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 130 / 288

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Doris Southern

Mailing Address 235 Gundry Dr.

City

Falls Church

State

VA

Zip Code

22046

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
US Dept. of State

Occupation

Inventory Management Specialist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 8 / 2 0 0 5

Transaction ID: SA11AI.11940

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Doris Southern

Mailing Address 235 Gundry Dr.

City

Falls Church

State

VA

Zip Code

22046

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
US Dept. of State

Occupation

Inventory Management Specialist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 9 / 2 0 0 5

Transaction ID: SA11AI.11941

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Doris Southern

Mailing Address 235 Gundry Dr.

City

Falls Church

State

VA

Zip Code

22046

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
US Dept. of State

Occupation

Inventory Management Specialist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

435.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 1 / 2 0 0 5

Transaction ID: SA11AI.11942

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) .....

225.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 131 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Doris Southern

Mailing Address 235 Gundry Dr.

City

Falls Church

State

VA

Zip Code

22046

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
US Dept. of State

Occupation

Inventory Management Specialist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 9 / 2 0 0 5

Transaction ID: SA11AI.12464

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

John Stevenson

Mailing Address 248 Laurel Lane

City

West Kingston

State

RI

Zip Code

02891

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Univ. of R. I.

Occupation

Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 0 / 2 0 0 5

Transaction ID: SA11AI.12471

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Linea Stewart

Mailing Address 310 Central Ave.

City

Menlo Park

State

CA

Zip Code

94025

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Child Psychologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 3 / 2 0 0 5

Transaction ID: SA11AI.11952

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 132 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Linea Stewart

Mailing Address 310 Central Ave.

City

Menlo Park

State

CA

Zip Code

94025

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Child Psychologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
1 2 / 2 3 / 2 0 0 5

Transaction ID: SA11AI.12472

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Ellen Stone-Belic

Mailing Address 418 W. Webster

City

Chicago

State

IL

Zip Code

60614

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Columbia College Chicago

Occupation

Psychotherapist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 8 / 1 2 / 2 0 0 5

Transaction ID: SA11AI.10305

Amount of Each Receipt this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

Ellen Stone-Belic

Mailing Address 418 W. Webster

City

Chicago

State

IL

Zip Code

60614

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Columbia College Chicago

Occupation

Psychotherapist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y  
1 1 / 1 3 / 2 0 0 5

Transaction ID: SA11AI.11955

Amount of Each Receipt this Period

200.00

**SUBTOTAL** of Receipts This Page (optional) .....

725.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 133 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Shari Stone-Mediatore

Mailing Address 112 Pennsylvania Ave.

City

Delaware

State

OH

Zip Code

43015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ohio Wesleyan University

Occupation  
Educator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 0 5

Transaction ID: SA11AI.9542

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Shari Stone-Mediatore

Mailing Address 112 Pennsylvania Ave.

City

Delaware

State

OH

Zip Code

43015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Ohio Wesleyan University

Occupation  
Educator

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 3 / 2 0 0 5

Transaction ID: SA11AI.11956

Amount of Each Receipt this Period

75.00

**C.**

Full Name (Last, First, Middle Initial)

Gerry Straatemeier

Mailing Address 4721 E. Wagon Train Rd.

City

Tucson

State

AZ

Zip Code

85739

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Minister

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 5 / 2 0 0 5

Transaction ID: SA11AI.10964

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

350.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 134 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Gerry Straatemeier

Mailing Address 4721 E. Wagon Train Rd.

City

Tucson

State

AZ

Zip Code

85739

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Minister

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 3 1 / 2 0 0 5

Transaction ID: SA11AI.11453

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Gerry Straatemeier

Mailing Address 4721 E. Wagon Train Rd.

City

Tucson

State

AZ

Zip Code

85739

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Minister

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 5 / 2 0 0 5

Transaction ID: SA11AI.11958

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Gerry Straatemeier

Mailing Address 4721 E. Wagon Train Rd.

City

Tucson

State

AZ

Zip Code

85739

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Minister

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 5 / 2 0 0 5

Transaction ID: SA11AI.12475

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 135 / 288

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Kathleen M. Straede

Mailing Address 719 Cathedral Pointe Lane

City

Santa Barbara

State

CA

Zip Code

93111

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Activist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

286.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 7 / 2 0 0 5

Transaction ID: SA11AI.11454

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Kathleen M. Straede

Mailing Address 719 Cathedral Pointe Lane

City

Santa Barbara

State

CA

Zip Code

93111

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Activist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

386.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 7 / 2 0 0 5

Transaction ID: SA11AI.11959

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Kathleen M. Straede

Mailing Address 719 Cathedral Pointe Lane

City

Santa Barbara

State

CA

Zip Code

93111

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NoneOccupation  
Activist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

486.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 7 / 2 0 0 5

Transaction ID: SA11AI.12476

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional) .....

300.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Stephen Strahs

Mailing Address 921 Melrose Ave.

City

Melrose Park

State

PA

Zip Code

19027

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 7 / 2 0 0 5

Transaction ID: SA11AI.10969

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Mary Summers

Mailing Address 1011 Smith Dr.

City

Bala Cynwyd

State

PA

Zip Code

19004

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of Pennsylvania

Occupation  
Senior Fellow

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 3 1 / 2 0 0 5

Transaction ID: SA11AI.10315

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Mary Summers

Mailing Address 1011 Smith Dr.

City

Bala Cynwyd

State

PA

Zip Code

19004

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of Pennsylvania

Occupation  
Senior Fellow

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 1 / 2 0 0 5

Transaction ID: SA11AI.11455

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

100.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Mary Summers

Mailing Address 1011 Smith Dr.

City

Bala Cynwyd

State

PA

Zip Code

19004

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of Pennsylvania

Occupation

Senior Fellow

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 1 / 2 0 0 5

Transaction ID: SA11AI.11962

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Mary Summers

Mailing Address 1011 Smith Dr.

City

Bala Cynwyd

State

PA

Zip Code

19004

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
University of Pennsylvania

Occupation

Senior Fellow

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 1 / 2 0 0 5

Transaction ID: SA11AI.12480

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Charles Swan

Mailing Address 1301 8th Ave.

City

Natrona Heights

State

PA

Zip Code

15065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Justice Lobby

Occupation

Bd. of Directors

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 9 / 2 0 0 5

Transaction ID: SA11AI.11964

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 138 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Charles Swan

Mailing Address 1301 8th Ave.

City

Natrona Heights

State

PA

Zip Code

15065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Justice Lobby

Occupation

Bd. of Directors

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 7 / 2 0 0 5

Transaction ID: SA11AI.11965

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Charles Swan

Mailing Address 1301 8th Ave.

City

Natrona Heights

State

PA

Zip Code

15065

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Justice Lobby

Occupation

Bd. of Directors

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 9 / 2 0 0 5

Transaction ID: SA11AI.12482

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Anna Swanson

Mailing Address 2502 Lake Ave.

City

Cheverly

State

MD

Zip Code

20785

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation

None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 9 / 2 0 0 5

Transaction ID: SA11AI.10975

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Anna Swanson

Mailing Address 2502 Lake Ave.

City

Cheverly

State

MD

Zip Code

20785

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 9 / 2 0 0 5

Transaction ID: SA11AI.11458

Amount of Each Receipt this Period

100.00

**B.**

Full Name (Last, First, Middle Initial)

Anna Swanson

Mailing Address 2502 Lake Ave.

City

Cheverly

State

MD

Zip Code

20785

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 9 / 2 0 0 5

Transaction ID: SA11AI.11966

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

Anna Swanson

Mailing Address 2502 Lake Ave.

City

Cheverly

State

MD

Zip Code

20785

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 9 / 2 0 0 5

Transaction ID: SA11AI.12483

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 140 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Linda Swanson

Mailing Address 7180 Baldwin Ridge Rd.

City

Warrenton

State

VA

Zip Code

20187

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Student

Occupation  
Student

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 5 / 2 0 0 5

Transaction ID: SA11AI.10326

Amount of Each Receipt this Period

35.00

**B.**

Full Name (Last, First, Middle Initial)

Linda Swanson

Mailing Address 7180 Baldwin Ridge Rd.

City

Warrenton

State

VA

Zip Code

20187

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Student

Occupation  
Student

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 8 / 2 0 0 5

Transaction ID: SA11AI.10327

Amount of Each Receipt this Period

35.00

**C.**

Full Name (Last, First, Middle Initial)

Linda Swanson

Mailing Address 7180 Baldwin Ridge Rd.

City

Warrenton

State

VA

Zip Code

20187

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Student

Occupation  
Student

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 0 / 2 0 0 5

Transaction ID: SA11AI.10976

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

120.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 141 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Linda Swanson

Mailing Address 7180 Baldwin Ridge Rd.

City

Warrenton

State

VA

Zip Code

20187

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Student

Occupation  
Student

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

355.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 8 / 2 0 0 5

Transaction ID: SA11AI.10977

Amount of Each Receipt this Period

35.00

**B.**

Full Name (Last, First, Middle Initial)

Linda Swanson

Mailing Address 7180 Baldwin Ridge Rd.

City

Warrenton

State

VA

Zip Code

20187

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Student

Occupation  
Student

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 8 / 2 0 0 5

Transaction ID: SA11AI.11459

Amount of Each Receipt this Period

35.00

**C.**

Full Name (Last, First, Middle Initial)

Linda Swanson

Mailing Address 7180 Baldwin Ridge Rd.

City

Warrenton

State

VA

Zip Code

20187

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Student

Occupation  
Student

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 8 / 2 0 0 5

Transaction ID: SA11AI.11967

Amount of Each Receipt this Period

35.00

**SUBTOTAL** of Receipts This Page (optional) .....

105.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 142 / 288

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Linda Swanson

Mailing Address 7180 Baldwin Ridge Rd.

City

Warrenton

State

VA

Zip Code

20187

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
StudentOccupation  
Student

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 8 / 2 0 0 5

Transaction ID: SA11AI.12484

Amount of Each Receipt this Period

35.00

**B.**

Full Name (Last, First, Middle Initial)

William Taylor

Mailing Address 2645 Peters Rd.

City

Dexter

State

MI

Zip Code

48130

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ColorbokOccupation  
President, CEO

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 4 / 2 0 0 5

Transaction ID: SA11AI.9561

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Sharon Toji

Mailing Address 3 Brisbane Way

City

Irvine

State

CA

Zip Code

92612

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SelfOccupation  
ADA Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 2 1 / 2 0 0 5

Transaction ID: SA11AI.10343

Amount of Each Receipt this Period

20.00

SUBTOTAL of Receipts This Page (optional) .....

305.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 143 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Sharon Toji

Mailing Address 3 Brisbane Way

City

Irvine

State

CA

Zip Code

92612

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

ADA Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 8 / 2 0 0 5

Transaction ID: SA11AI.10982

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

Sharon Toji

Mailing Address 3 Brisbane Way

City

Irvine

State

CA

Zip Code

92612

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

ADA Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

249.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 8 / 2 0 0 5

Transaction ID: SA11AI.11464

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Sharon Toji

Mailing Address 3 Brisbane Way

City

Irvine

State

CA

Zip Code

92612

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

ADA Consultant

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 8 / 2 0 0 5

Transaction ID: SA11AI.11970

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

70.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 144 / 288

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
---	------------------------------	------------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Sharon Toji

Mailing Address 3 Brisbane Way

City

Irvine

State

CA

Zip Code

92612

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

ADA Consultant

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

299.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 8 / 2 0 0 5

Transaction ID: SA11AI.12493

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Josie Tong

Mailing Address 699 Enchanted Way

City

Pacific Palisades

State

CA

Zip Code

90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sotheby's Intl Realty

Occupation

Real Estate

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 1 3 / 2 0 0 5

Transaction ID: SA11AI.9568

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Josie Tong

Mailing Address 699 Enchanted Way

City

Pacific Palisades

State

CA

Zip Code

90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sotheby's Intl Realty

Occupation

Real Estate

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 1 / 2 0 0 5

Transaction ID: SA11AI.10345

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional) .....

125.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 145 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Josie Tong

Mailing Address 699 Enchanted Way

City

Pacific Palisades

State

CA

Zip Code

90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sotheby's Intl Realty

Occupation

Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 6 / 2 0 0 5

Transaction ID: SA11AI.10346

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Josie Tong

Mailing Address 699 Enchanted Way

City

Pacific Palisades

State

CA

Zip Code

90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sotheby's Intl Realty

Occupation

Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 5 / 2 0 0 5

Transaction ID: SA11AI.10983

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Josie Tong

Mailing Address 699 Enchanted Way

City

Pacific Palisades

State

CA

Zip Code

90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sotheby's Intl Realty

Occupation

Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 5

Transaction ID: SA11AI.11465

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 146 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Josie Tong

Mailing Address 699 Enchanted Way

City

Pacific Palisades

State

CA

Zip Code

90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sotheby's Intl Realty

Occupation

Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 5

Transaction ID: SA11AI.11971

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Josie Tong

Mailing Address 699 Enchanted Way

City

Pacific Palisades

State

CA

Zip Code

90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Sotheby's Intl Realty

Occupation

Real Estate

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 5 / 2 0 0 5

Transaction ID: SA11AI.12494

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Kathleen Voigt-Walsh

Mailing Address 40 Hiram S Crossing

City

Jericho

State

VT

Zip Code

05465

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.11978

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

125.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 147 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Kathleen Voigt-Walsh

Mailing Address 40 Hiram S Crossing

City

Jericho

State

VT

Zip Code

05465

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.12509

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Deborah Vollmer

Mailing Address 7202 44th St.

City

Chevy Chase

State

MD

Zip Code

20815

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

409.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 1 / 2 0 0 5

Transaction ID: SA11AI.11980

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mary Watkins

Mailing Address 8915 D Trone Cir.

City

Austin

State

TX

Zip Code

78758

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Artist/Teacher

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 6 / 2 0 0 5

Transaction ID: SA11AI.12515

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

300.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 148 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Andrew Weede

Mailing Address 5825 E. Baker St.

City

Tucson

State

AZ

Zip Code

85711

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 7 / 2 0 0 5

Transaction ID: SA11AI.11014

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Andrew Weede

Mailing Address 5825 E. Baker St.

City

Tucson

State

AZ

Zip Code

85711

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
None

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 0 / 2 0 0 5

Transaction ID: SA11AI.12516

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Eric Werthman

Mailing Address 484 First Street

City

Brooklyn

State

NY

Zip Code

11215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Psychotherapist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 8 / 2 0 0 5

Transaction ID: SA11AI.12169

Amount of Each Receipt this Period

2500.00

**SUBTOTAL** of Receipts This Page (optional) .....

2550.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 149 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

John Wilson

Mailing Address 4550 18th St.

City

San Francisco

State

CA

Zip Code

94114

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
San Francisco State Unive-  
rsity

Occupation  
Professor

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.10402

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

Marcy Winograd

Mailing Address 954 Fiske St.

City

Pacific Palisades

State

CA

Zip Code

90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Trainer

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

345.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 1 / 2 0 0 5

Transaction ID: SA11AI.12529

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

Teddi Winograd

Mailing Address 954 Fiske St.

City

Pacific Palisades

State

CA

Zip Code

90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Retired

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2150.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 3 0 / 2 0 0 5

Transaction ID: SA11AI.12530

Amount of Each Receipt this Period

250.00

**SUBTOTAL** of Receipts This Page (optional) .....

290.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 150 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Barbara Winters

Mailing Address PO Box 150

City

Mill River

State

MA

Zip Code

01244

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 9 / 2 0 0 5

Transaction ID: SA11AI.11500

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

Barbara Winters

Mailing Address PO Box 150

City

Mill River

State

MA

Zip Code

01244

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 9 / 2 0 0 5

Transaction ID: SA11AI.12004

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)

Barbara Winters

Mailing Address PO Box 150

City

Mill River

State

MA

Zip Code

01244

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
None

Occupation  
Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 9 / 2 0 0 5

Transaction ID: SA11AI.12531

Amount of Each Receipt this Period

20.00

**SUBTOTAL** of Receipts This Page (optional) .....

60.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 151 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Jamie Wolf

Mailing Address 812 N. Foothill Rd.

City

Beverly Hills

State

CA

Zip Code

90210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Writer/Journalist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 8 / 2 0 0 5

Transaction ID: SA11AI.12008

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Jamie Wolf

Mailing Address 812 N. Foothill Rd.

City

Beverly Hills

State

CA

Zip Code

90210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Writer/Journalist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 0 8 / 2 0 0 5

Transaction ID: SA11AI.12534

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Rosalind Wolf

Mailing Address 16503 Las Casas Pl.

City

Pacific Palisades

State

CA

Zip Code

90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CA Teachers Assn.

Occupation

Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 2 4 / 2 0 0 5

Transaction ID: SA11AI.9619

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 152 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Rosalind Wolf

Mailing Address 16503 Las Casas Pl.

City

Pacific Palisades

State

CA

Zip Code

90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CA Teachers Assn.

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 1 4 / 2 0 0 5

Transaction ID: SA11AI.10413

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Rosalind Wolf

Mailing Address 16503 Las Casas Pl.

City

Pacific Palisades

State

CA

Zip Code

90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CA Teachers Assn.

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 1 1 / 2 0 0 5

Transaction ID: SA11AI.11036

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Rosalind Wolf

Mailing Address 16503 Las Casas Pl.

City

Pacific Palisades

State

CA

Zip Code

90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CA Teachers Assn.

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 1 / 2 0 0 5

Transaction ID: SA11AI.11505

Amount of Each Receipt this Period

25.00

**SUBTOTAL** of Receipts This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 153 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Rosalind Wolf

Mailing Address 16503 Las Casas Pl.

City

Pacific Palisades

State

CA

Zip Code

90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CA Teachers Assn.

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 1 / 2 0 0 5

Transaction ID: SA11AI.12009

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Rosalind Wolf

Mailing Address 16503 Las Casas Pl.

City

Pacific Palisades

State

CA

Zip Code

90272

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CA Teachers Assn.

Occupation  
Attorney

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 1 / 2 0 0 5

Transaction ID: SA11AI.12535

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Denise Woods

Mailing Address 1590 Shade Rd.

City

Akron

State

OH

Zip Code

44333

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation  
Psychologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

555.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 7 / 0 5 / 2 0 0 5

Transaction ID: SA11AI.9621

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Denise Woods

Mailing Address 1590 Shade Rd.

City

Akron

State

OH

Zip Code

44333

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Psychologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

605.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 8 / 0 8 / 2 0 0 5

Transaction ID: SA11AI.10416

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Denise Woods

Mailing Address 1590 Shade Rd.

City

Akron

State

OH

Zip Code

44333

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Psychologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

655.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 0 7 / 2 0 0 5

Transaction ID: SA11AI.11040

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Denise Woods

Mailing Address 1590 Shade Rd.

City

Akron

State

OH

Zip Code

44333

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Psychologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

705.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 0 5 / 2 0 0 5

Transaction ID: SA11AI.11507

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Denise Woods

Mailing Address 1590 Shade Rd.

City

Akron

State

OH

Zip Code

44333

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Psychologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

755.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 0 7 / 2 0 0 5

Transaction ID: SA11AI.12012

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Denise Woods

Mailing Address 1590 Shade Rd.

City

Akron

State

OH

Zip Code

44333

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Psychologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

805.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 1 9 / 2 0 0 5

Transaction ID: SA11AI.12537

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Michael Yannell

Mailing Address 2911 N. Racine Ave.

City

Chicago

State

IL

Zip Code

60657

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Rush University Medical  
Center

Occupation

Pharmacist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 5

Transaction ID: SA11AI.12017

Amount of Each Receipt this Period

100.00

**SUBTOTAL** of Receipts This Page (optional) .....

200.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Roberto Zarate

Mailing Address 4141 Cambridge Rd.

City

La Canada Flt

State

CA

Zip Code

91011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UCLA

Occupation

Psychologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 4 / 2 0 0 5

Transaction ID: SA11AI.11055

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Roberto Zarate

Mailing Address 4141 Cambridge Rd.

City

La Canada Flt

State

CA

Zip Code

91011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UCLA

Occupation

Psychologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 2 4 / 2 0 0 5

Transaction ID: SA11AI.11516

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

Roberto Zarate

Mailing Address 4141 Cambridge Rd.

City

La Canada Flt

State

CA

Zip Code

91011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UCLA

Occupation

Psychologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 2 4 / 2 0 0 5

Transaction ID: SA11AI.12020

Amount of Each Receipt this Period

50.00

**SUBTOTAL** of Receipts This Page (optional) .....

150.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 157 / 288

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Roberto Zarate

Mailing Address 4141 Cambridge Rd.

City

La Canada Flt

State

CA

Zip Code

91011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UCLA

Occupation

Psychologist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 4 / 2 0 0 5

Transaction ID: SA11AI.12545

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

Daphne Zuniga

Mailing Address 16000 Ventura Blvd.

City

Encino

State

CA

Zip Code

91436

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Actress

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 8 / 2 0 0 5

Transaction ID: SA11AI.11520

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)

Daphne Zuniga

Mailing Address 16000 Ventura Blvd.

City

Encino

State

CA

Zip Code

91436

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Self

Occupation

Actress

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y  
1 1 / 1 8 / 2 0 0 5

Transaction ID: SA11AI.12022

Amount of Each Receipt this Period

40.00

**SUBTOTAL** of Receipts This Page (optional) .....

130.00

**TOTAL** This Period (last page this line number only) .....

43295.52

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
------------------------------	------------------------------	---	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------	-----------------------------

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

LIVABLE COMMUNITIES PAC

Mailing Address 1831 BAY STREET SE

City

WASHINGTON

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.**C** C00426965

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 3 0 / 2 0 0 5

Transaction ID: SA11C.34457

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional) .....

2500.00

TOTAL This Period (last page this line number only) .....

2500.00

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 159 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Accessline

Mailing Address 11201 SE 8th St.

City Bellevue State WA Zip Code 98004

Purpose of Disbursement  
1800 number

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12619

Date of Disbursement

08 / 11 / 2005

Amount of Each Disbursement this Period

23.68

B.

Full Name (Last, First, Middle Initial)

Accessline

Mailing Address 11201 SE 8th St.

City Bellevue State WA Zip Code 98004

Purpose of Disbursement  
1800 number

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12620

Date of Disbursement

09 / 12 / 2005

Amount of Each Disbursement this Period

25.48

C.

Full Name (Last, First, Middle Initial)

Accessline

Mailing Address 11201 SE 8th St.

City Bellevue State WA Zip Code 98004

Purpose of Disbursement  
1800 number

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12621

Date of Disbursement

10 / 12 / 2005

Amount of Each Disbursement this Period

27.97

SUBTOTAL of Disbursements This Page (optional) .....

77.13

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<b>A.</b> Full Name (Last, First, Middle Initial) Accessline	<b>Transaction ID:</b> SB21B.12622 <b>Date of Disbursement</b>																				
Mailing Address 11201 SE 8th St.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	1		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	1		2	0	0	5												
City Bellevue State WA Zip Code 98004	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement 1800 number Candidate Name	<table border="1"> <tr> <td colspan="10">24.65</td> </tr> </table>	24.65																			
24.65																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Accessline	<b>Transaction ID:</b> SB21B.12623 <b>Date of Disbursement</b>																				
Mailing Address 11201 SE 8th St.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	2		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	2		2	0	0	5												
City Bellevue State WA Zip Code 98004	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement 1800 number Candidate Name	<table border="1"> <tr> <td colspan="10">26.55</td> </tr> </table>	26.55																			
26.55																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) ADP	<b>Transaction ID:</b> SB21B.12556 <b>Date of Disbursement</b>																				
Mailing Address 7333 S. Hardy Dr. Bldg. E #101	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	7		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	7		2	0	0	5												
City Tempe State AZ Zip Code 85283	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement July Payroll Fee Candidate Name	<table border="1"> <tr> <td colspan="10">57.03</td> </tr> </table>	57.03																			
57.03																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

108.23

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

ADP

Mailing Address 7333 S. Hardy Dr.  
Bldg. E #101

City Tempe State AZ Zip Code 85283

Purpose of Disbursement

Payroll fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12557

Date of Disbursement

07 / 13 / 2005

Amount of Each Disbursement this Period

43.00

B.

Full Name (Last, First, Middle Initial)

ADP

Mailing Address 7333 S. Hardy Dr.  
Bldg. E #101

City Tempe State AZ Zip Code 85283

Purpose of Disbursement

Salary - July 15

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12558

Date of Disbursement

07 / 14 / 2005

Amount of Each Disbursement this Period

2040.91

C.

Full Name (Last, First, Middle Initial)

ADP

Mailing Address 7333 S. Hardy Dr.  
Bldg. E #101

City Tempe State AZ Zip Code 85283

Purpose of Disbursement

Payroll taxes - July 15

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12559

Date of Disbursement

07 / 14 / 2005

Amount of Each Disbursement this Period

658.34

SUBTOTAL of Disbursements This Page (optional) .....

2742.25

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 162 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

ADP

Mailing Address 7333 S. Hardy Dr.  
Bldg. E #101

City Tempe State AZ Zip Code 85283

Purpose of Disbursement

Payroll fees - July

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12560

Date of Disbursement

07 / 20 / 2005

Amount of Each Disbursement this Period

68.42

B.

Full Name (Last, First, Middle Initial)

ADP

Mailing Address 7333 S. Hardy Dr.  
Bldg. E #101

City Tempe State AZ Zip Code 85283

Purpose of Disbursement

Payroll fees for August

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12624

Date of Disbursement

08 / 10 / 2005

Amount of Each Disbursement this Period

43.00

C.

Full Name (Last, First, Middle Initial)

ADP

Mailing Address 7333 S. Hardy Dr.  
Bldg. E #101

City Tempe State AZ Zip Code 85283

Purpose of Disbursement

Payroll August

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12625

Date of Disbursement

08 / 12 / 2005

Amount of Each Disbursement this Period

1207.42

SUBTOTAL of Disbursements This Page (optional) .....

1318.84

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

ADP

Mailing Address 7333 S. Hardy Dr.  
Bldg. E #101

City Tempe State AZ Zip Code 85283

Purpose of Disbursement

Payroll taxes - August

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12626

Date of Disbursement

08 / 12 / 2005

Amount of Each Disbursement this Period

407.33

B.

Full Name (Last, First, Middle Initial)

ADP

Mailing Address 7333 S. Hardy Dr.  
Bldg. E #101

City Tempe State AZ Zip Code 85283

Purpose of Disbursement

Payroll fees - August

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12627

Date of Disbursement

08 / 17 / 2005

Amount of Each Disbursement this Period

57.03

C.

Full Name (Last, First, Middle Initial)

ADP

Mailing Address 7333 S. Hardy Dr.  
Bldg. E #101

City Tempe State AZ Zip Code 85283

Purpose of Disbursement

Payroll fees for September

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12628

Date of Disbursement

09 / 14 / 2005

Amount of Each Disbursement this Period

43.00

SUBTOTAL of Disbursements This Page (optional) .....

507.36

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

ADP

Mailing Address 7333 S. Hardy Dr.  
Bldg. E #101

City Tempe State AZ Zip Code 85283

Purpose of Disbursement

Payroll fees - September

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12629

Date of Disbursement

09 / 28 / 2005

Amount of Each Disbursement this Period

57.03

**B.**

Full Name (Last, First, Middle Initial)

ADP

Mailing Address 7333 S. Hardy Dr.  
Bldg. E #101

City Tempe State AZ Zip Code 85283

Purpose of Disbursement

Payroll fees for October

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12630

Date of Disbursement

10 / 13 / 2005

Amount of Each Disbursement this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

ADP

Mailing Address 7333 S. Hardy Dr.  
Bldg. E #101

City Tempe State AZ Zip Code 85283

Purpose of Disbursement

Payroll fees - October

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12631

Date of Disbursement

10 / 26 / 2005

Amount of Each Disbursement this Period

66.03

**SUBTOTAL** of Disbursements This Page (optional) .....

148.06

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) ADP</p> <p>Mailing Address 7333 S. Hardy Dr. Bldg. E #101</p> <p>City Tempe State AZ Zip Code 85283</p> <p>Purpose of Disbursement Payroll fees - November</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.12632</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="25.00"/></p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) ADP</p> <p>Mailing Address 7333 S. Hardy Dr. Bldg. E #101</p> <p>City Tempe State AZ Zip Code 85283</p> <p>Purpose of Disbursement Payroll fees - November</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.12633</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="3"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="57.03"/></p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) ADP</p> <p>Mailing Address 7333 S. Hardy Dr. Bldg. E #101</p> <p>City Tempe State AZ Zip Code 85283</p> <p>Purpose of Disbursement Payroll fees - December</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.12634</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="25.00"/></p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**107.03**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

ADP

Mailing Address 7333 S. Hardy Dr.  
Bldg. E #101

City Tempe State AZ Zip Code 85283

Purpose of Disbursement

Payroll fees - December

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12635

Date of Disbursement

12 / 30 / 2005

Amount of Each Disbursement this Period

57.03

B.

Full Name (Last, First, Middle Initial)

Alchymedia

Mailing Address 1720 Seaton St., NW

City Washington State DC Zip Code 20009

Purpose of Disbursement

Videography/Editing services

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12639

Date of Disbursement

12 / 19 / 2005

Amount of Each Disbursement this Period

250.00

C.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address 70100 AXP  
Financial Center

City Minneapolis State MN Zip Code 55474

Purpose of Disbursement

CC fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12561

Date of Disbursement

07 / 01 / 2005

Amount of Each Disbursement this Period

85.70

SUBTOTAL of Disbursements This Page (optional) .....

392.73

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 167 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address 70100 AXP  
Financial Center

City Minneapolis State MN Zip Code 55474

Purpose of Disbursement  
CC fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12648

Date of Disbursement

07 / 27 / 2005

Amount of Each Disbursement this Period

4.50

B.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address 70100 AXP  
Financial Center

City Minneapolis State MN Zip Code 55474

Purpose of Disbursement  
CC fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12649

Date of Disbursement

08 / 01 / 2005

Amount of Each Disbursement this Period

31.24

C.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address 70100 AXP  
Financial Center

City Minneapolis State MN Zip Code 55474

Purpose of Disbursement  
CC fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12650

Date of Disbursement

08 / 29 / 2005

Amount of Each Disbursement this Period

4.50

SUBTOTAL of Disbursements This Page (optional) .....

40.24

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address 70100 AXP  
Financial Center

City Minneapolis State MN Zip Code 55474

Purpose of Disbursement  
CC fees

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12651

Date of Disbursement

08 / 31 / 2005

Amount of Each Disbursement this Period

30.97

B.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address 70100 AXP  
Financial Center

City Minneapolis State MN Zip Code 55474

Purpose of Disbursement  
CC fees

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12652

Date of Disbursement

09 / 27 / 2005

Amount of Each Disbursement this Period

4.50

C.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address 70100 AXP  
Financial Center

City Minneapolis State MN Zip Code 55474

Purpose of Disbursement  
CC fees

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12653

Date of Disbursement

10 / 01 / 2005

Amount of Each Disbursement this Period

61.89

SUBTOTAL of Disbursements This Page (optional) ►

97.36

TOTAL This Period (last page this line number only) ►



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 169 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address 70100 AXP  
Financial Center

City Minneapolis State MN Zip Code 55474

Purpose of Disbursement  
CC fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12654

Date of Disbursement

10 / 27 / 2005

Amount of Each Disbursement this Period

4.50

B.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address 70100 AXP  
Financial Center

City Minneapolis State MN Zip Code 55474

Purpose of Disbursement  
CC fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12655

Date of Disbursement

10 / 31 / 2005

Amount of Each Disbursement this Period

31.55

C.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address 70100 AXP  
Financial Center

City Minneapolis State MN Zip Code 55474

Purpose of Disbursement  
CC fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12656

Date of Disbursement

11 / 30 / 2005

Amount of Each Disbursement this Period

4.50

SUBTOTAL of Disbursements This Page (optional) .....

40.55

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 170 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address 70100 AXP  
Financial Center

City Minneapolis State MN Zip Code 55474

Purpose of Disbursement  
CC fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12657

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

74.46

B.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address 70100 AXP  
Financial Center

City Minneapolis State MN Zip Code 55474

Purpose of Disbursement  
CC fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12658

Date of Disbursement

12 / 28 / 2005

Amount of Each Disbursement this Period

4.50

C.

Full Name (Last, First, Middle Initial)

American Express

Mailing Address 70100 AXP  
Financial Center

City Minneapolis State MN Zip Code 55474

Purpose of Disbursement  
CC fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12659

Date of Disbursement

12 / 31 / 2005

Amount of Each Disbursement this Period

41.53

SUBTOTAL of Disbursements This Page (optional) .....

120.49

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 171 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

America West Airlines

Mailing Address 111 W. Rio Salado Pkwy.

City State Zip Code  
Tempe AZ 85281

Purpose of Disbursement

On-line fee for airfare

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12646

Date of Disbursement

08 / 01 / 2005

Amount of Each Disbursement this Period

5.00

B.

Full Name (Last, First, Middle Initial)

America West Airlines

Mailing Address 111 W. Rio Salado Pkwy.

City State Zip Code  
Tempe AZ 85281

Purpose of Disbursement

Flight to DC for Kevin

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12647

Date of Disbursement

11 / 01 / 2005

Amount of Each Disbursement this Period

356.80

C.

Full Name (Last, First, Middle Initial)

Arizona Mail Center

Mailing Address 12280 W. Indian School Rd.

City State Zip Code  
Litchfield Park AZ 85340

Purpose of Disbursement

Shipping for house party kits

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12567

Date of Disbursement

07 / 05 / 2005

Amount of Each Disbursement this Period

25.72

SUBTOTAL of Disbursements This Page (optional) .....

387.52

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 172 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Arizona Mail Center

Mailing Address 12280 W. Indian School Rd.

City Litchfield Park State AZ Zip Code 85340

Purpose of Disbursement  
Copies

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12667

Date of Disbursement

08 / 03 / 2005

Amount of Each Disbursement this Period

10.88

B.

Full Name (Last, First, Middle Initial)

Arizona Mail Center

Mailing Address 12280 W. Indian School Rd.

City Litchfield Park State AZ Zip Code 85340

Purpose of Disbursement  
Mail box key

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12668

Date of Disbursement

08 / 23 / 2005

Amount of Each Disbursement this Period

5.00

C.

Full Name (Last, First, Middle Initial)

Arizona Mail Center

Mailing Address 12280 W. Indian School Rd.

City Litchfield Park State AZ Zip Code 85340

Purpose of Disbursement  
Shipping

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12669

Date of Disbursement

09 / 07 / 2005

Amount of Each Disbursement this Period

11.62

SUBTOTAL of Disbursements This Page (optional) ▶

27.50

TOTAL This Period (last page this line number only) ▶

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 173 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Arizona Mail Center

Mailing Address 12280 W. Indian School Rd.

City Litchfield Park State AZ Zip Code 85340

Purpose of Disbursement  
PO Box

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12670

Date of Disbursement

10 / 04 / 2005

Amount of Each Disbursement this Period

30.90

**B.**

Full Name (Last, First, Middle Initial)

Audio Marketing

Mailing Address 1010 Depot Hill, Suite 206

City Broomfield State CO Zip Code 80020

Purpose of Disbursement  
Audio Postcards

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12676

Date of Disbursement

08 / 16 / 2005

Amount of Each Disbursement this Period

31.73

**C.**

Full Name (Last, First, Middle Initial)

Audio Marketing

Mailing Address 1010 Depot Hill, Suite 206

City Broomfield State CO Zip Code 80020

Purpose of Disbursement  
Audio Postcards

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12677

Date of Disbursement

09 / 16 / 2005

Amount of Each Disbursement this Period

29.95

**SUBTOTAL** of Disbursements This Page (optional) .....

92.58

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 174 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<b>A.</b> Full Name (Last, First, Middle Initial) Audio Marketing	<b>Transaction ID:</b> SB21B.12678 <b>Date of Disbursement</b>																				
Mailing Address 1010 Depot Hill, Suite 206	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>5</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	7		2	0	5	
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	7		2	0	5													
City Broomfield State CO Zip Code 80020	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Audio Postcards Candidate Name	<table border="1"> <tr> <td colspan="10">30.39</td> </tr> </table>	30.39																			
30.39																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Audio Marketing	<b>Transaction ID:</b> SB21B.12679 <b>Date of Disbursement</b>																				
Mailing Address 1010 Depot Hill, Suite 206	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>5</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	6		2	0	5	
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	6		2	0	5													
City Broomfield State CO Zip Code 80020	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Audio Postcards Candidate Name	<table border="1"> <tr> <td colspan="10">29.95</td> </tr> </table>	29.95																			
29.95																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Audio Marketing	<b>Transaction ID:</b> SB21B.12680 <b>Date of Disbursement</b>																				
Mailing Address 1010 Depot Hill, Suite 206	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>5</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	1		2	0	5	
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	1		2	0	5													
City Broomfield State CO Zip Code 80020	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Board Message Mgmt. Candidate Name	<table border="1"> <tr> <td colspan="10">29.95</td> </tr> </table>	29.95																			
29.95																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

90.29

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 175 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Audio Marketing

Mailing Address 1010 Depot Hill, Suite 206

City Broomfield State CO Zip Code 80020

Purpose of Disbursement  
Board Message Mgmt.

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12681

Date of Disbursement

12 / 19 / 2005

Amount of Each Disbursement this Period

29.95

**B.**

Full Name (Last, First, Middle Initial)

Nicoli Bailey

Mailing Address 7 Lee St.

City Marblehead State MA Zip Code 01945

Purpose of Disbursement  
Salary - July

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12901

Date of Disbursement

08 / 17 / 2005

Amount of Each Disbursement this Period

150.00

**C.**

Full Name (Last, First, Middle Initial)

Nicoli Bailey

Mailing Address 7 Lee St.

City Marblehead State MA Zip Code 01945

Purpose of Disbursement  
Salary - October

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12902

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

150.00

**SUBTOTAL** of Disbursements This Page (optional) .....

329.95

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 176 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
Charlotte

State  
NC

Zip Code  
28255

Purpose of Disbursement  
Merchant Account Fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12569

Date of Disbursement

07 / 01 / 2005

Amount of Each Disbursement this Period

750.45

B.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
Charlotte

State  
NC

Zip Code  
28255

Purpose of Disbursement  
Checks

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12571

Date of Disbursement

07 / 21 / 2005

Amount of Each Disbursement this Period

15.00

C.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
Charlotte

State  
NC

Zip Code  
28255

Purpose of Disbursement  
Merchant fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12684

Date of Disbursement

08 / 01 / 2005

Amount of Each Disbursement this Period

303.97

SUBTOTAL of Disbursements This Page (optional) .....

1069.42

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 177 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City Charlotte State NC Zip Code 28255

Purpose of Disbursement

Merchant fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12685

Date of Disbursement

09 / 01 / 2005

Amount of Each Disbursement this Period

326.01

B.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City Charlotte State NC Zip Code 28255

Purpose of Disbursement

Charge back

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12693

Date of Disbursement

09 / 16 / 2005

Amount of Each Disbursement this Period

120.00

C.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City Charlotte State NC Zip Code 28255

Purpose of Disbursement

Charge back

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12694

Date of Disbursement

09 / 16 / 2005

Amount of Each Disbursement this Period

50.00

SUBTOTAL of Disbursements This Page (optional) .....

496.01

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 178 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
CharlotteState  
NCZip Code  
28255Purpose of Disbursement  
Charge back

Candidate Name

001

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12695

Date of Disbursement

M M / D D / Y Y Y Y  
0 9 / 1 6 / 2 0 0 5

Amount of Each Disbursement this Period

25.00

B.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
CharlotteState  
NCZip Code  
28255Purpose of Disbursement  
Charge back

Candidate Name

001

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12696

Date of Disbursement

M M / D D / Y Y Y Y  
0 9 / 1 6 / 2 0 0 5

Amount of Each Disbursement this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
CharlotteState  
NCZip Code  
28255Purpose of Disbursement  
Merchant fees

Candidate Name

001

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12686

Date of Disbursement

M M / D D / Y Y Y Y  
1 0 / 0 3 / 2 0 0 5

Amount of Each Disbursement this Period

626.54

SUBTOTAL of Disbursements This Page (optional) .....

676.54

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 179 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
Charlotte

State  
NC

Zip Code  
28255

Purpose of Disbursement  
CC fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12688

Date of Disbursement

11 / 01 / 2005

Amount of Each Disbursement this Period

282.14

B.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
Charlotte

State  
NC

Zip Code  
28255

Purpose of Disbursement  
CC fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12689

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

569.58

C.

Full Name (Last, First, Middle Initial)

Bank of America

Mailing Address 100 N. Tryon St.

City  
Charlotte

State  
NC

Zip Code  
28255

Purpose of Disbursement  
CC fees

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12690

Date of Disbursement

12 / 31 / 2005

Amount of Each Disbursement this Period

419.09

SUBTOTAL of Disbursements This Page (optional) ▶

1270.81

TOTAL This Period (last page this line number only) ▶

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 180 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Angie Bobst-Romero

Mailing Address 2315 N. 39th Pl.

City  
Phoenix

State  
AZ

Zip Code  
85008

Purpose of Disbursement  
Reimbursement for cell phone payment

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12562

Date of Disbursement

07 / 01 / 2005

Amount of Each Disbursement this Period

21.62

**B.**

Full Name (Last, First, Middle Initial)

Angie Bobst-Romero

Mailing Address 2315 N. 39th Pl.

City  
Phoenix

State  
AZ

Zip Code  
85008

Purpose of Disbursement  
Reimbursement for party pack supplies

Candidate Name

003

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12563

Date of Disbursement

07 / 01 / 2005

Amount of Each Disbursement this Period

70.37

**C.**

Full Name (Last, First, Middle Initial)

Angie Bobst-Romero

Mailing Address 2315 N. 39th Pl.

City  
Phoenix

State  
AZ

Zip Code  
85008

Purpose of Disbursement  
Postage for party pack supplies

Candidate Name

003

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12564

Date of Disbursement

07 / 01 / 2005

Amount of Each Disbursement this Period

112.24

**SUBTOTAL** of Disbursements This Page (optional) .....

204.23

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 181 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Angie Bobst-Romero

Mailing Address 2315 N. 39th Pl.

City  
Phoenix

State  
AZ

Zip Code  
85008

Purpose of Disbursement  
Payroll - July

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12565

Date of Disbursement

07 / 12 / 2005

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Angie Bobst-Romero

Mailing Address 2315 N. 39th Pl.

City  
Phoenix

State  
AZ

Zip Code  
85008

Purpose of Disbursement  
Reimbursement for party pack supplies

Candidate Name

003

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12566

Date of Disbursement

07 / 26 / 2005

Amount of Each Disbursement this Period

81.76

**C.**

Full Name (Last, First, Middle Initial)

Angie Bobst-Romero

Mailing Address 2315 N. 39th Pl.

City  
Phoenix

State  
AZ

Zip Code  
85008

Purpose of Disbursement  
Salary - August

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12660

Date of Disbursement

08 / 17 / 2005

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1581.76

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 182 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Angie Bobst-Romero

Mailing Address 2315 N. 39th Pl.

City  
Phoenix

State  
AZ

Zip Code  
85008

Purpose of Disbursement  
Salary - September

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12661

Date of Disbursement

09 / 07 / 2005

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Angie Bobst-Romero

Mailing Address 2315 N. 39th Pl.

City  
Phoenix

State  
AZ

Zip Code  
85008

Purpose of Disbursement  
Salary - October

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12662

Date of Disbursement

10 / 01 / 2005

Amount of Each Disbursement this Period

1500.00

C.

Full Name (Last, First, Middle Initial)

Angie Bobst-Romero

Mailing Address 2315 N. 39th Pl.

City  
Phoenix

State  
AZ

Zip Code  
85008

Purpose of Disbursement  
Salary - November

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12663

Date of Disbursement

11 / 01 / 2005

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) .....

3500.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 183 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Angie Bobst-Romero

Mailing Address 2315 N. 39th Pl.

City  
PhoenixState  
AZZip Code  
85008Purpose of Disbursement  
Salary - November

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12664

Date of Disbursement

11 / 15 / 2005

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Angie Bobst-Romero

Mailing Address 2315 N. 39th Pl.

City  
PhoenixState  
AZZip Code  
85008Purpose of Disbursement  
Salary - December

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12665

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Angie Bobst-Romero

Mailing Address 2315 N. 39th Pl.

City  
PhoenixState  
AZZip Code  
85008Purpose of Disbursement  
Salary - December

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12666

Date of Disbursement

12 / 14 / 2005

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) ►

2000.00

TOTAL This Period (last page this line number only) ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 184 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Sherry Bohlen

Transaction ID: SB21B.12974

Date of Disbursement

08 / 08 / 2005

Mailing Address 14021 E. Becker Lane

City State Zip Code  
Scottsdale AZ 85259

Amount of Each Disbursement this Period

270.40

Purpose of Disbursement  
Reimbursement for travel expenses

002

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)

Sherry Bohlen

Transaction ID: SB21B.12975

Date of Disbursement

11 / 07 / 2005

Mailing Address 14021 E. Becker Lane

City State Zip Code  
Scottsdale AZ 85259

Amount of Each Disbursement this Period

213.90

Purpose of Disbursement  
Reimbursement for travel expenses

002

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)

Kimberly Buchan

Transaction ID: SB21B.12871

Date of Disbursement

10 / 13 / 2005

Mailing Address 3037 Crisfield Dr. NE

City State Zip Code  
Grand Rapids MI 49525

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement  
Salary - October

001

Category/  
Type

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) .....

734.30

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 185 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Kimberly Buchan

Mailing Address 3037 Crisfield Dr. NE

City Grand Rapids State MI Zip Code 49525

Purpose of Disbursement

Salary - November

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12873

Date of Disbursement

11 / 01 / 2005

Amount of Each Disbursement this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Kimberly Buchan

Mailing Address 3037 Crisfield Dr. NE

City Grand Rapids State MI Zip Code 49525

Purpose of Disbursement

Reimbursement for postage

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12874

Date of Disbursement

11 / 11 / 2005

Amount of Each Disbursement this Period

7.40

C.

Full Name (Last, First, Middle Initial)

Kimberly Buchan

Mailing Address 3037 Crisfield Dr. NE

City Grand Rapids State MI Zip Code 49525

Purpose of Disbursement

Salary for December

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12875

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional) ▶

507.40

TOTAL This Period (last page this line number only) ▶

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<b>A.</b> Full Name (Last, First, Middle Initial) Capitol Advantage	<b>Transaction ID:</b> SB21B.12572 <b>Date of Disbursement</b>																				
Mailing Address 2751 Prosperity Ave., Suite 600	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		0	8		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		0	8		2	0	0	5												
City State Zip Code Fairfax VA 22031	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Capitol Directory service Candidate Name	<table border="1"> <tr> <td colspan="10">1333.33</td> </tr> </table>	1333.33																			
1333.33																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Capitol Advantage	<b>Transaction ID:</b> SB21B.12699 <b>Date of Disbursement</b>																				
Mailing Address 2751 Prosperity Ave., Suite 600	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	0		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	0		2	0	0	5												
City State Zip Code Fairfax VA 22031	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Capitol Directory service Candidate Name	<table border="1"> <tr> <td colspan="10">1500.00</td> </tr> </table>	1500.00																			
1500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Tim Carpenter	<b>Transaction ID:</b> SB21B.12609 <b>Date of Disbursement</b>																				
Mailing Address 18 Beacon St.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	5		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	5		2	0	0	5												
City State Zip Code Florence MA 01062	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary - July Candidate Name	<table border="1"> <tr> <td colspan="10">3000.00</td> </tr> </table>	3000.00																			
3000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**5833.33**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 187 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Tim Carpenter

Mailing Address 18 Beacon St.

City  
FlorenceState  
MAZip Code  
01062Purpose of Disbursement  
Reimbursement for travel and cell

Candidate Name

002  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12610

Date of Disbursement

07 / 26 / 2005

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Tim Carpenter

Mailing Address 18 Beacon St.

City  
FlorenceState  
MAZip Code  
01062Purpose of Disbursement  
Salary - August

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12924

Date of Disbursement

08 / 17 / 2005

Amount of Each Disbursement this Period

1500.00

C.

Full Name (Last, First, Middle Initial)

Tim Carpenter

Mailing Address 18 Beacon St.

City  
FlorenceState  
MAZip Code  
01062Purpose of Disbursement  
Salary - August

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12925

Date of Disbursement

08 / 29 / 2005

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional) ▶

3500.00

TOTAL This Period (last page this line number only) ▶

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 188 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Tim Carpenter

Mailing Address 18 Beacon St.

City  
Florence

State  
MA

Zip Code  
01062

Purpose of Disbursement  
Salary - September

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12926

Date of Disbursement

09 / 07 / 2005

Amount of Each Disbursement this Period

3000.00

B.

Full Name (Last, First, Middle Initial)

Tim Carpenter

Mailing Address 18 Beacon St.

City  
Florence

State  
MA

Zip Code  
01062

Purpose of Disbursement  
Cell phone reimbursement

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12977

Date of Disbursement

09 / 07 / 2005

Amount of Each Disbursement this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Tim Carpenter

Mailing Address 18 Beacon St.

City  
Florence

State  
MA

Zip Code  
01062

Purpose of Disbursement  
Salary - October

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12927

Date of Disbursement

10 / 01 / 2005

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional) .....

6250.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 189 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Tim Carpenter

Mailing Address 18 Beacon St.

City  
Florence

State  
MA

Zip Code  
01062

Purpose of Disbursement  
Reimbursement for cell and taxis

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12978

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

2149.00

B.

Full Name (Last, First, Middle Initial)

Tim Carpenter

Mailing Address 18 Beacon St.

City  
Florence

State  
MA

Zip Code  
01062

Purpose of Disbursement  
Salary - November

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12928

Date of Disbursement

11 / 01 / 2005

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Tim Carpenter

Mailing Address 18 Beacon St.

City  
Florence

State  
MA

Zip Code  
01062

Purpose of Disbursement  
Salary - November

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12929

Date of Disbursement

11 / 30 / 2005

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional) ►

5149.00

TOTAL This Period (last page this line number only) ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 190 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Tim Carpenter

Mailing Address 18 Beacon St.

City  
Florence

State  
MA

Zip Code  
01062

Purpose of Disbursement

Reimbursements for phone, computer, taxi

Candidate Name

001

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Transaction ID: SB21B.12979

Date of Disbursement

12 / 08 / 2005

Amount of Each Disbursement this Period

1702.34

B.

Full Name (Last, First, Middle Initial)

Tim Carpenter

Mailing Address 18 Beacon St.

City  
Florence

State  
MA

Zip Code  
01062

Purpose of Disbursement

Salary - December

Candidate Name

001

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Transaction ID: SB21B.12930

Date of Disbursement

12 / 20 / 2005

Amount of Each Disbursement this Period

2000.00

C.

Full Name (Last, First, Middle Initial)

Tim Carpenter

Mailing Address 18 Beacon St.

City  
Florence

State  
MA

Zip Code  
01062

Purpose of Disbursement

Salary - December

Candidate Name

001

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Transaction ID: SB21B.12980

Date of Disbursement

12 / 20 / 2005

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) .....

4202.34

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 191 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Collective Voice

Mailing Address 109 Main Rd.

City  
Colrain

State  
MA

Zip Code  
01340

Purpose of Disbursement  
Phone bank fundraising, MA, CA

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12706

Date of Disbursement

09 / 28 / 2005

Amount of Each Disbursement this Period

843.50

**B.**

Full Name (Last, First, Middle Initial)

Collective Voice

Mailing Address 109 Main Rd.

City  
Colrain

State  
MA

Zip Code  
01340

Purpose of Disbursement  
Phone bank fundraising, MA, CA

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12708

Date of Disbursement

10 / 24 / 2005

Amount of Each Disbursement this Period

673.50

**C.**

Full Name (Last, First, Middle Initial)

Collective Voice

Mailing Address 109 Main Rd.

City  
Colrain

State  
MA

Zip Code  
01340

Purpose of Disbursement  
Phone bank fundraising

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12709

Date of Disbursement

11 / 11 / 2005

Amount of Each Disbursement this Period

45.50

**SUBTOTAL** of Disbursements This Page (optional) .....

1562.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 192 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<b>A.</b> Full Name (Last, First, Middle Initial) Collective Voice	<b>Transaction ID:</b> SB21B.12710 <b>Date of Disbursement</b>																				
Mailing Address 109 Main Rd.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>5</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	1		2	0	5	
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	1		2	0	5													
City Colrain State MA Zip Code 01340	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Phone bank fundraising Candidate Name	<table border="1"> <tr> <td colspan="10">350.00</td> </tr> </table>	350.00																			
350.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Collective Voice	<b>Transaction ID:</b> SB21B.12711 <b>Date of Disbursement</b>																				
Mailing Address 109 Main Rd.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>5</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	1		2	0	5	
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	1		2	0	5													
City Colrain State MA Zip Code 01340	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Phone Bank fundraising Candidate Name	<table border="1"> <tr> <td colspan="10">329.00</td> </tr> </table>	329.00																			
329.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Collective Voice	<b>Transaction ID:</b> SB21B.12712 <b>Date of Disbursement</b>																				
Mailing Address 109 Main Rd.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>5</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	1		2	0	5	
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	1		2	0	5													
City Colrain State MA Zip Code 01340	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Phone bank fundraising Candidate Name	<table border="1"> <tr> <td colspan="10">196.00</td> </tr> </table>	196.00																			
196.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**875.00**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 193 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Collective Voice</p> <p>Mailing Address 109 Main Rd.</p> <p>City Colrain State MA Zip Code 01340</p> <p>Purpose of Disbursement Phone bank fundraising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.12713</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="486.50"/></p> <p><input type="text" value="003"/> Category/Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Collective Voice</p> <p>Mailing Address 109 Main Rd.</p> <p>City Colrain State MA Zip Code 01340</p> <p>Purpose of Disbursement Phone bank fundraising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.12714</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="185.50"/></p> <p><input type="text" value="003"/> Category/Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) Collective Voice</p> <p>Mailing Address 109 Main Rd.</p> <p>City Colrain State MA Zip Code 01340</p> <p>Purpose of Disbursement Phone bank fundraising</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.12715</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="5"/> <input type="text" value="5"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="140.00"/></p> <p><input type="text" value="003"/> Category/Type</p>

**SUBTOTAL** of Disbursements This Page (optional) .....

**812.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Collective Voice

Mailing Address 109 Main Rd.

City  
Colrain

State  
MA

Zip Code  
01340

Purpose of Disbursement  
Phone bank fundraising

Candidate Name

003

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.12716

Date of Disbursement

12 / 08 / 2005

Amount of Each Disbursement this Period

192.50

**B.**

Full Name (Last, First, Middle Initial)

Congress Merge

Mailing Address PO Box 232

City  
Mount Vernon

State  
VA

Zip Code  
22121

Purpose of Disbursement  
CD lookup table

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.12718

Date of Disbursement

10 / 31 / 2005

Amount of Each Disbursement this Period

450.00

**C.**

Full Name (Last, First, Middle Initial)

Cybersource

Mailing Address 1295 Charleston Rd.

City  
Mountain View

State  
CA

Zip Code  
94043

Purpose of Disbursement  
Merchant Account

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.12573

Date of Disbursement

07 / 07 / 2005

Amount of Each Disbursement this Period

29.00

**SUBTOTAL** of Disbursements This Page (optional) .....

671.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Cybersource

Mailing Address 1295 Charleston Rd.

City  
Mountain View

State  
CA

Zip Code  
94043

Purpose of Disbursement  
Merchant account

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12721

Date of Disbursement

08 / 08 / 2005

Amount of Each Disbursement this Period

29.00

B.

Full Name (Last, First, Middle Initial)

Cybersource

Mailing Address 1295 Charleston Rd.

City  
Mountain View

State  
CA

Zip Code  
94043

Purpose of Disbursement  
Merchant account

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12722

Date of Disbursement

09 / 09 / 2005

Amount of Each Disbursement this Period

29.00

C.

Full Name (Last, First, Middle Initial)

Cybersource

Mailing Address 1295 Charleston Rd.

City  
Mountain View

State  
CA

Zip Code  
94043

Purpose of Disbursement  
Merchant account

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12723

Date of Disbursement

11 / 02 / 2005

Amount of Each Disbursement this Period

29.00

**SUBTOTAL** of Disbursements This Page (optional) .....

87.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Cybersource

Mailing Address 1295 Charleston Rd.

City  
Mountain View

State  
CA

Zip Code  
94043

Purpose of Disbursement  
Merchant account

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12724

Date of Disbursement

11 / 14 / 2005

Amount of Each Disbursement this Period

29.00

B.

Full Name (Last, First, Middle Initial)

Cybersource

Mailing Address 1295 Charleston Rd.

City  
Mountain View

State  
CA

Zip Code  
94043

Purpose of Disbursement  
Merchant account

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12725

Date of Disbursement

12 / 07 / 2005

Amount of Each Disbursement this Period

29.00

C.

Full Name (Last, First, Middle Initial)

Days Inn

Mailing Address 4400 Connecticut, NW

City  
Washington

State  
DC

Zip Code  
20008

Purpose of Disbursement  
Hotel for Kevin and Tim

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12726

Date of Disbursement

11 / 21 / 2005

Amount of Each Disbursement this Period

340.08

SUBTOTAL of Disbursements This Page (optional) .....

398.08

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Dem Store

Mailing Address 5104 Macarthur Blvd. NW

City  
Washington

State  
DC

Zip Code  
20016

Purpose of Disbursement  
Buttons, bumper stickers, sticker roll

Candidate Name

004  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12727

Date of Disbursement

08 / 17 / 2005

Amount of Each Disbursement this Period

1206.28

**B.**

Full Name (Last, First, Middle Initial)

Dem Store

Mailing Address 5104 Macarthur Blvd. NW

City  
Washington

State  
DC

Zip Code  
20016

Purpose of Disbursement  
Buttons

Candidate Name

004  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12728

Date of Disbursement

09 / 30 / 2005

Amount of Each Disbursement this Period

252.14

**C.**

Full Name (Last, First, Middle Initial)

Expedia.com

Mailing Address 1444 W. Auto Dr.

City  
Tempe

State  
AZ

Zip Code  
85284

Purpose of Disbursement  
Tim to DC for hearing and rally

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12741

Date of Disbursement

08 / 29 / 2005

Amount of Each Disbursement this Period

5.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1463.42

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Expedia.com

Mailing Address 1444 W. Auto Dr.

City  
TempeState  
AZZip Code  
85284Purpose of Disbursement  
Tim to DC for hearing and rally

Candidate Name

002

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12742

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	9		2	0	0	5

Amount of Each Disbursement this Period

158.60

B.

Full Name (Last, First, Middle Initial)

Expedia.com

Mailing Address 1444 W. Auto Dr.

City  
TempeState  
AZZip Code  
85284Purpose of Disbursement  
Tim to DC

Candidate Name

002

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12743

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	0	5

Amount of Each Disbursement this Period

158.60

C.

Full Name (Last, First, Middle Initial)

Expedia.com

Mailing Address 1444 W. Auto Dr.

City  
TempeState  
AZZip Code  
85284Purpose of Disbursement  
Tim to DC

Candidate Name

002

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12744

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	9		2	0	0	5

Amount of Each Disbursement this Period

5.00

SUBTOTAL of Disbursements This Page (optional) .....

322.20

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Expedia.com

Mailing Address 1444 W. Auto Dr.

City  
Tempe

State  
AZ

Zip Code  
85284

Purpose of Disbursement  
Michele and Angie to DC

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12745

Date of Disbursement

09 / 09 / 2005

Amount of Each Disbursement this Period

10.00

B.

Full Name (Last, First, Middle Initial)

Expedia.com

Mailing Address 1444 W. Auto Dr.

City  
Tempe

State  
AZ

Zip Code  
85284

Purpose of Disbursement  
Tim to Phoenix

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12746

Date of Disbursement

09 / 12 / 2005

Amount of Each Disbursement this Period

269.50

C.

Full Name (Last, First, Middle Initial)

Expedia.com

Mailing Address 1444 W. Auto Dr.

City  
Tempe

State  
AZ

Zip Code  
85284

Purpose of Disbursement  
Tim to Phoenix

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12747

Date of Disbursement

09 / 12 / 2005

Amount of Each Disbursement this Period

5.00

SUBTOTAL of Disbursements This Page (optional) .....

284.50

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Expedia.com

Mailing Address 1444 W. Auto Dr.

City  
Tempe

State  
AZ

Zip Code  
85284

Purpose of Disbursement  
Nancy to Phoenix

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12748

Date of Disbursement

09 / 23 / 2005

Amount of Each Disbursement this Period

346.90

B.

Full Name (Last, First, Middle Initial)

Expedia.com

Mailing Address 1444 W. Auto Dr.

City  
Tempe

State  
AZ

Zip Code  
85284

Purpose of Disbursement  
Nancy to Phoenix

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12749

Date of Disbursement

09 / 23 / 2005

Amount of Each Disbursement this Period

24.99

C.

Full Name (Last, First, Middle Initial)

Expedia.com

Mailing Address 1444 W. Auto Dr.

City  
Tempe

State  
AZ

Zip Code  
85284

Purpose of Disbursement  
Tim to DC

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12751

Date of Disbursement

10 / 14 / 2005

Amount of Each Disbursement this Period

5.00

**SUBTOTAL** of Disbursements This Page (optional) .....

376.89

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Expedia.com

Mailing Address 1444 W. Auto Dr.

City  
TempeState  
AZZip Code  
85284Purpose of Disbursement  
Tim to DC

Candidate Name

002  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12752

Date of Disbursement

11 / 09 / 2005

Amount of Each Disbursement this Period

5.00

B.

Full Name (Last, First, Middle Initial)

Expedia.com

Mailing Address 1444 W. Auto Dr.

City  
TempeState  
AZZip Code  
85284Purpose of Disbursement  
Tim to DC

Candidate Name

002  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12753

Date of Disbursement

11 / 09 / 2005

Amount of Each Disbursement this Period

288.40

C.

Full Name (Last, First, Middle Initial)

Expedia.com

Mailing Address 1444 W. Auto Dr.

City  
TempeState  
AZZip Code  
85284Purpose of Disbursement  
Tim to Phoenix

Candidate Name

002  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12754

Date of Disbursement

11 / 23 / 2005

Amount of Each Disbursement this Period

107.90

SUBTOTAL of Disbursements This Page (optional) .....

401.30

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 202 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Expedia.com

Mailing Address 1444 W. Auto Dr.

City  
Tempe

State  
AZ

Zip Code  
85284

Purpose of Disbursement  
Tim to Phoenix

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12755

Date of Disbursement

11 / 23 / 2005

Amount of Each Disbursement this Period

94.20

B.

Full Name (Last, First, Middle Initial)

Expedia.com

Mailing Address 1444 W. Auto Dr.

City  
Tempe

State  
AZ

Zip Code  
85284

Purpose of Disbursement  
Tim to Phoenix

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12756

Date of Disbursement

11 / 23 / 2005

Amount of Each Disbursement this Period

5.00

C.

Full Name (Last, First, Middle Initial)

Expedia.com

Mailing Address 1444 W. Auto Dr.

City  
Tempe

State  
AZ

Zip Code  
85284

Purpose of Disbursement  
Tim to Phoenix

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12757

Date of Disbursement

11 / 23 / 2005

Amount of Each Disbursement this Period

5.00

**SUBTOTAL** of Disbursements This Page (optional) .....

104.20

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<b>A.</b> Full Name (Last, First, Middle Initial) Expedia.com	<b>Transaction ID:</b> SB21B.12758 <b>Date of Disbursement</b>
Mailing Address 1444 W. Auto Dr.	<div> <div>11</div> <div>25</div> <div>2005</div> </div>
City Tempe State AZ Zip Code 85284	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Tim to DC	<div>183.40</div>
Candidate Name	<div>002</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Expedia.com	<b>Transaction ID:</b> SB21B.12759 <b>Date of Disbursement</b>
Mailing Address 1444 W. Auto Dr.	<div> <div>11</div> <div>25</div> <div>2005</div> </div>
City Tempe State AZ Zip Code 85284	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Tim to DC	<div>5.00</div>
Candidate Name	<div>002</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Expedia.com	<b>Transaction ID:</b> SB21B.12760 <b>Date of Disbursement</b>
Mailing Address 1444 W. Auto Dr.	<div> <div>11</div> <div>25</div> <div>2005</div> </div>
City Tempe State AZ Zip Code 85284	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Tim to MA	<div>134.90</div>
Candidate Name	<div>002</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**323.30**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 204 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Expedia.com

Mailing Address 1444 W. Auto Dr.

City  
TempeState  
AZZip Code  
85284Purpose of Disbursement  
Tim to MA

Candidate Name

002  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12761

Date of Disbursement

11 / 25 / 2005

Amount of Each Disbursement this Period

5.00

B.

Full Name (Last, First, Middle Initial)

Expedia.com

Mailing Address 1444 W. Auto Dr.

City  
TempeState  
AZZip Code  
85284Purpose of Disbursement  
Nancy to Phoenix

Candidate Name

002  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12763

Date of Disbursement

11 / 27 / 2005

Amount of Each Disbursement this Period

283.40

C.

Full Name (Last, First, Middle Initial)

Expedia.com

Mailing Address 1444 W. Auto Dr.

City  
TempeState  
AZZip Code  
85284Purpose of Disbursement  
Nancy to Phoenix

Candidate Name

002  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12764

Date of Disbursement

11 / 27 / 2005

Amount of Each Disbursement this Period

5.00

SUBTOTAL of Disbursements This Page (optional) .....

293.40

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 205 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Expedia.com

Mailing Address 1444 W. Auto Dr.

City  
Tempe

State  
AZ

Zip Code  
85284

Purpose of Disbursement  
Kevin to OC

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12765

Date of Disbursement

12 / 06 / 2005

Amount of Each Disbursement this Period

5.00

B.

Full Name (Last, First, Middle Initial)

Expedia.com

Mailing Address 1444 W. Auto Dr.

City  
Tempe

State  
AZ

Zip Code  
85284

Purpose of Disbursement  
Kevin to OC

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12766

Date of Disbursement

12 / 06 / 2005

Amount of Each Disbursement this Period

223.90

C.

Full Name (Last, First, Middle Initial)

Expedia.com

Mailing Address 1444 W. Auto Dr.

City  
Tempe

State  
AZ

Zip Code  
85284

Purpose of Disbursement  
Tim to OC

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12767

Date of Disbursement

12 / 08 / 2005

Amount of Each Disbursement this Period

265.90

**SUBTOTAL** of Disbursements This Page (optional) .....

494.80

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 206 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Expedia.com

Mailing Address 1444 W. Auto Dr.

City  
Tempe

State  
AZ

Zip Code  
85284

Purpose of Disbursement  
Tim to OC

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12768

Date of Disbursement

12 / 08 / 2005

Amount of Each Disbursement this Period

5.00

B.

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
Spokane

State  
WA

Zip Code  
99202

Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12579

Date of Disbursement

07 / 01 / 2005

Amount of Each Disbursement this Period

4.50

C.

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
Spokane

State  
WA

Zip Code  
99202

Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12580

Date of Disbursement

07 / 07 / 2005

Amount of Each Disbursement this Period

13.80

**SUBTOTAL** of Disbursements This Page (optional) .....

23.30

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 207 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
Spokane

State  
WA

Zip Code  
99202

Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12581

Date of Disbursement

07 / 11 / 2005

Amount of Each Disbursement this Period

2.10

**B.**

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
Spokane

State  
WA

Zip Code  
99202

Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12582

Date of Disbursement

07 / 13 / 2005

Amount of Each Disbursement this Period

6.00

**C.**

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
Spokane

State  
WA

Zip Code  
99202

Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12583

Date of Disbursement

07 / 14 / 2005

Amount of Each Disbursement this Period

2.30

**SUBTOTAL** of Disbursements This Page (optional) .....

10.40

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 208 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<b>A.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.12584 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	0		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	0		2	0	0	5												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td colspan="10">5.70</td> </tr> </table>	5.70																			
5.70																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.12585 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	0		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	0		2	0	0	5												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td colspan="10">3.50</td> </tr> </table>	3.50																			
3.50																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.12586 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>7</td><td></td><td>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7		2	5		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
0	7		2	5		2	0	0	5												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td colspan="10">2.10</td> </tr> </table>	2.10																			
2.10																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

11.30

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 209 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
Spokane

State  
WA

Zip Code  
99202

Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12769

Date of Disbursement

07 / 27 / 2005

Amount of Each Disbursement this Period

6.90

B.

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
Spokane

State  
WA

Zip Code  
99202

Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12770

Date of Disbursement

07 / 28 / 2005

Amount of Each Disbursement this Period

3.20

C.

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
Spokane

State  
WA

Zip Code  
99202

Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12771

Date of Disbursement

08 / 01 / 2005

Amount of Each Disbursement this Period

3.50

SUBTOTAL of Disbursements This Page (optional) .....

13.60

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 210 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
SpokaneState  
WAZip Code  
99202Purpose of Disbursement  
Gateway

Candidate Name

001

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12772

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	2		2	0	0	5

Amount of Each Disbursement this Period

3.10

B.

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
SpokaneState  
WAZip Code  
99202Purpose of Disbursement  
Gateway

Candidate Name

001

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12773

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	3		2	0	0	5

Amount of Each Disbursement this Period

5.50

C.

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
SpokaneState  
WAZip Code  
99202Purpose of Disbursement  
Gateway

Candidate Name

001

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12774

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	0	5

Amount of Each Disbursement this Period

2.40

SUBTOTAL of Disbursements This Page (optional) .....

11.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 211 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City Spokane State WA Zip Code 99202

Purpose of Disbursement

Gateway

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12775

Date of Disbursement

08 / 09 / 2005

Amount of Each Disbursement this Period

10.60

**B.**

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City Spokane State WA Zip Code 99202

Purpose of Disbursement

Gateway

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12776

Date of Disbursement

08 / 10 / 2005

Amount of Each Disbursement this Period

2.60

**C.**

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City Spokane State WA Zip Code 99202

Purpose of Disbursement

Gateway

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12777

Date of Disbursement

08 / 11 / 2005

Amount of Each Disbursement this Period

2.30

**SUBTOTAL** of Disbursements This Page (optional) .....

15.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 212 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<b>A.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.12778 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	5		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	5		2	0	0	5												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td colspan="10">2.50</td> </tr> </table>	2.50																			
2.50																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.12779 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	6		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	6		2	0	0	5												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td colspan="10">2.00</td> </tr> </table>	2.00																			
2.00																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.12780 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	7		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	7		2	0	0	5												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td colspan="10">4.90</td> </tr> </table>	4.90																			
4.90																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
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Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

9.40

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 213 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<b>A.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.12781 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	8		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	8		2	0	0	5												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td>3.90</td> </tr> </table>	3.90																			
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Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.12782 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	3		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	3		2	0	0	5												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td>2.20</td> </tr> </table>	2.20																			
2.20																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.12783 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>8</td><td></td><td>2</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	4		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	4		2	0	0	5												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td>2.30</td> </tr> </table>	2.30																			
2.30																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

8.40

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 214 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
SpokaneState  
WAZip Code  
99202Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12784

Date of Disbursement

M M / D D / Y Y Y Y  
0 8 / 2 6 / 2 0 0 5

Amount of Each Disbursement this Period

3.80

B.

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
SpokaneState  
WAZip Code  
99202Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12785

Date of Disbursement

M M / D D / Y Y Y Y  
0 8 / 3 0 / 2 0 0 5

Amount of Each Disbursement this Period

2.80

C.

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
SpokaneState  
WAZip Code  
99202Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12786

Date of Disbursement

M M / D D / Y Y Y Y  
0 8 / 3 1 / 2 0 0 5

Amount of Each Disbursement this Period

6.90

SUBTOTAL of Disbursements This Page (optional) ▶

13.50

TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 215 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<b>A.</b>	Full Name (Last, First, Middle Initial) Fast Charge	Transaction ID: SB21B.12787 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 5
	Mailing Address 3107 E. Mission	
	City Spokane State WA Zip Code 99202	Amount of Each Disbursement this Period 2.40
	Purpose of Disbursement Gateway Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b>	Full Name (Last, First, Middle Initial) Fast Charge	Transaction ID: SB21B.12788 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 7 / 2 0 0 5
	Mailing Address 3107 E. Mission	
	City Spokane State WA Zip Code 99202	Amount of Each Disbursement this Period 2.00
	Purpose of Disbursement Gateway Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b>	Full Name (Last, First, Middle Initial) Fast Charge	Transaction ID: SB21B.12789 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 5
	Mailing Address 3107 E. Mission	
	City Spokane State WA Zip Code 99202	Amount of Each Disbursement this Period 12.60
	Purpose of Disbursement Gateway Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) .....

17.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 216 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<b>A.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.12790 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	9		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		0	9		2	0	0	5												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td colspan="10">2.50</td> </tr> </table>	2.50																			
2.50																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
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Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.12791 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	2		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	2		2	0	0	5												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td colspan="10">2.90</td> </tr> </table>	2.90																			
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Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.12792 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	4		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	4		2	0	0	5												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td colspan="10">4.80</td> </tr> </table>	4.80																			
4.80																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

10.20

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 217 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<b>A.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.12793 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	4		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	4		2	0	0	5												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td>3.60</td> </tr> </table>	3.60																			
3.60																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.12794 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	6		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	6		2	0	0	5												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td>3.30</td> </tr> </table>	3.30																			
3.30																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.12795 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	9		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	9		2	0	0	5												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td>4.60</td> </tr> </table>	4.60																			
4.60																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

11.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 218 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<b>A.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.12796 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	0		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	0		2	0	0	5												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td colspan="10">2.20</td> </tr> </table>	2.20																			
2.20																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.12797 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	1		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	1		2	0	0	5												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td colspan="10">4.30</td> </tr> </table>	4.30																			
4.30																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.12799 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	3		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		2	3		2	0	0	5												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td colspan="10">4.20</td> </tr> </table>	4.20																			
4.20																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

10.70

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 219 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
Spokane

State  
WA

Zip Code  
99202

Purpose of Disbursement  
Gateway

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12800

Date of Disbursement

09 / 26 / 2005

Amount of Each Disbursement this Period

2.60

B.

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
Spokane

State  
WA

Zip Code  
99202

Purpose of Disbursement  
Gateway

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12801

Date of Disbursement

09 / 27 / 2005

Amount of Each Disbursement this Period

4.50

C.

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
Spokane

State  
WA

Zip Code  
99202

Purpose of Disbursement  
Gateway

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12802

Date of Disbursement

09 / 28 / 2005

Amount of Each Disbursement this Period

7.70

SUBTOTAL of Disbursements This Page (optional) .....

14.80

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 220 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City Spokane State WA Zip Code 99202

Purpose of Disbursement

Gateway

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12803

Date of Disbursement

09 / 30 / 2005

Amount of Each Disbursement this Period

4.70

**B.**

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City Spokane State WA Zip Code 99202

Purpose of Disbursement

Gateway

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12804

Date of Disbursement

10 / 03 / 2005

Amount of Each Disbursement this Period

3.40

**C.**

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City Spokane State WA Zip Code 99202

Purpose of Disbursement

Gateway

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12805

Date of Disbursement

10 / 05 / 2005

Amount of Each Disbursement this Period

2.30

**SUBTOTAL** of Disbursements This Page (optional) .....

10.40

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 221 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<b>A.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.12806 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	7		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		0	7		2	0	0	5												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td colspan="10">11.00</td> </tr> </table>	11.00																			
11.00																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.12807 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	3		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	3		2	0	0	5												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td colspan="10">7.20</td> </tr> </table>	7.20																			
7.20																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.12808 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	4		2	0	0	5
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1	0		1	4		2	0	0	5												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td colspan="10">2.10</td> </tr> </table>	2.10																			
2.10																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

20.30

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 222 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<b>A.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.12809 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	8		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	8		2	0	0	5												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td colspan="10">2.30</td> </tr> </table>	2.30																			
2.30																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.12810 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	9		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		1	9		2	0	0	5												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td colspan="10">6.60</td> </tr> </table>	6.60																			
6.60																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.12811 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	1		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	1		2	0	0	5												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td colspan="10">3.60</td> </tr> </table>	3.60																			
3.60																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

12.50

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 223 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<b>A.</b>	Full Name (Last, First, Middle Initial) Fast Charge	Transaction ID: SB21B.12812 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 5
	Mailing Address 3107 E. Mission	
	City Spokane State WA Zip Code 99202	Amount of Each Disbursement this Period 7.00
	Purpose of Disbursement Gateway Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b>	Full Name (Last, First, Middle Initial) Fast Charge	Transaction ID: SB21B.12813 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 0 5
	Mailing Address 3107 E. Mission	
	City Spokane State WA Zip Code 99202	Amount of Each Disbursement this Period 2.40
	Purpose of Disbursement Gateway Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b>	Full Name (Last, First, Middle Initial) Fast Charge	Transaction ID: SB21B.12814 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 0 5
	Mailing Address 3107 E. Mission	
	City Spokane State WA Zip Code 99202	Amount of Each Disbursement this Period 2.30
	Purpose of Disbursement Gateway Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) .....

11.70

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 224 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
SpokaneState  
WAZip Code  
99202Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12815

Date of Disbursement

M M / D D / Y Y Y Y  
1 1 / 0 1 / 2 0 0 5

Amount of Each Disbursement this Period

2.90

B.

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
SpokaneState  
WAZip Code  
99202Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12816

Date of Disbursement

M M / D D / Y Y Y Y  
1 1 / 0 2 / 2 0 0 5

Amount of Each Disbursement this Period

4.30

C.

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
SpokaneState  
WAZip Code  
99202Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12817

Date of Disbursement

M M / D D / Y Y Y Y  
1 1 / 0 2 / 2 0 0 5

Amount of Each Disbursement this Period

2.00

SUBTOTAL of Disbursements This Page (optional) .....

9.20

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 225 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<b>A.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.12818 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>5</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		0	9		2	0	5	
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		0	9		2	0	5													
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td colspan="10">12.70</td> </tr> </table>	12.70																			
12.70																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.12819 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>5</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	4		2	0	5	
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	4		2	0	5													
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td colspan="10">3.50</td> </tr> </table>	3.50																			
3.50																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.12820 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>5</td><td></td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	6		2	0	5	
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	6		2	0	5													
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td colspan="10">9.40</td> </tr> </table>	9.40																			
9.40																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**25.60**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 226 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<b>A.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.12821 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	7		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	7		2	0	0	5												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td colspan="10">4.60</td> </tr> </table>	4.60																			
4.60																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.12822 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	1		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	1		2	0	0	5												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td colspan="10">2.40</td> </tr> </table>	2.40																			
2.40																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.12823 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	2		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	2		2	0	0	5												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td colspan="10">2.90</td> </tr> </table>	2.90																			
2.90																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

9.90

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 227 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
SpokaneState  
WAZip Code  
99202Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12824

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	3	/	2	0	0	5

Amount of Each Disbursement this Period

3.10

B.

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
SpokaneState  
WAZip Code  
99202Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12825

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	2	8	/	2	0	0	5

Amount of Each Disbursement this Period

2.10

C.

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
SpokaneState  
WAZip Code  
99202Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12826

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	3	0	/	2	0	0	5

Amount of Each Disbursement this Period

3.50

SUBTOTAL of Disbursements This Page (optional) .....

8.70

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 228 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<b>A.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.12827 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		3	0		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		3	0		2	0	0	5												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td colspan="10">5.20</td> </tr> </table>	5.20																			
5.20																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.12828 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	1		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	1		2	0	0	5												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td colspan="10">3.40</td> </tr> </table>	3.40																			
3.40																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.12829 <b>Date of Disbursement</b>																				
Mailing Address 3107 E. Mission	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	6		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	6		2	0	0	5												
City Spokane State WA Zip Code 99202	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Gateway	<table border="1"> <tr> <td colspan="10">2.10</td> </tr> </table>	2.10																			
2.10																					
Candidate Name	<table border="1"> <tr> <td>001</td> </tr> </table> Category/ Type	001																			
001																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

10.70

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 229 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
Spokane

State  
WA

Zip Code  
99202

Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.12830

Date of Disbursement

12 / 07 / 2005

Amount of Each Disbursement this Period

11.10

**B.**

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
Spokane

State  
WA

Zip Code  
99202

Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.12831

Date of Disbursement

12 / 12 / 2005

Amount of Each Disbursement this Period

3.60

**C.**

Full Name (Last, First, Middle Initial)

Fast Charge

Mailing Address 3107 E. Mission

City  
Spokane

State  
WA

Zip Code  
99202

Purpose of Disbursement  
Gateway

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.12832

Date of Disbursement

12 / 13 / 2005

Amount of Each Disbursement this Period

2.10

**SUBTOTAL** of Disbursements This Page (optional) .....

16.80

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 230 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<b>A.</b>	Full Name (Last, First, Middle Initial) Fast Charge	Transaction ID: SB21B.12833 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 4 / 2 0 0 5
	Mailing Address 3107 E. Mission	
	City Spokane State WA Zip Code 99202	Amount of Each Disbursement this Period 4.50
	Purpose of Disbursement Gateway Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b>	Full Name (Last, First, Middle Initial) Fast Charge	Transaction ID: SB21B.12834 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 7 / 2 0 0 5
	Mailing Address 3107 E. Mission	
	City Spokane State WA Zip Code 99202	Amount of Each Disbursement this Period 3.10
	Purpose of Disbursement Gateway Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b>	Full Name (Last, First, Middle Initial) Fast Charge	Transaction ID: SB21B.12835 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 9 / 2 0 0 5
	Mailing Address 3107 E. Mission	
	City Spokane State WA Zip Code 99202	Amount of Each Disbursement this Period 4.10
	Purpose of Disbursement Gateway Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) .....

11.70

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 231 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<b>A.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.12836 <b>Date of Disbursement</b>
Mailing Address 3107 E. Mission	<div> <div><sup>M</sup>1</div> <div><sup>M</sup>2</div> </div> <div> <div><sup>D</sup>2</div> <div><sup>D</sup>3</div> </div> <div> <div><sup>Y</sup>2</div> <div><sup>Y</sup>0</div> <div><sup>Y</sup>0</div> <div><sup>Y</sup>5</div> </div>
City Spokane State WA Zip Code 99202	Amount of Each Disbursement this Period
Purpose of Disbursement Gateway Candidate Name	<div>5.60</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.12837 <b>Date of Disbursement</b>
Mailing Address 3107 E. Mission	<div> <div><sup>M</sup>1</div> <div><sup>M</sup>2</div> </div> <div> <div><sup>D</sup>2</div> <div><sup>D</sup>3</div> </div> <div> <div><sup>Y</sup>2</div> <div><sup>Y</sup>0</div> <div><sup>Y</sup>0</div> <div><sup>Y</sup>5</div> </div>
City Spokane State WA Zip Code 99202	Amount of Each Disbursement this Period
Purpose of Disbursement Gateway Candidate Name	<div>2.50</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Fast Charge	<b>Transaction ID:</b> SB21B.12838 <b>Date of Disbursement</b>
Mailing Address 3107 E. Mission	<div> <div><sup>M</sup>1</div> <div><sup>M</sup>2</div> </div> <div> <div><sup>D</sup>2</div> <div><sup>D</sup>8</div> </div> <div> <div><sup>Y</sup>2</div> <div><sup>Y</sup>0</div> <div><sup>Y</sup>0</div> <div><sup>Y</sup>5</div> </div>
City Spokane State WA Zip Code 99202	Amount of Each Disbursement this Period
Purpose of Disbursement Gateway Candidate Name	<div>6.10</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

14.20

**TOTAL** This Period (last page this line number only) .....

X	21b		22		23		24		25		26
	27		28a		28b		28c		29		30b

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

FEC Schedule B (Form 3X) (Revised 02/2003)



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 233 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Alysia Fischer

Mailing Address 320 W. Vine St.

City Oxford State OH Zip Code 45056

Purpose of Disbursement  
Reimbursement for copies

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12642

Date of Disbursement

08 / 08 / 2005

Amount of Each Disbursement this Period

85.29

B.

Full Name (Last, First, Middle Initial)

Alysia Fischer

Mailing Address 320 W. Vine St.

City Oxford State OH Zip Code 45056

Purpose of Disbursement  
Reimbursement for cell phone and travel

Candidate Name

002

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12643

Date of Disbursement

08 / 08 / 2005

Amount of Each Disbursement this Period

247.37

C.

Full Name (Last, First, Middle Initial)

Alysia Fischer

Mailing Address 320 W. Vine St.

City Oxford State OH Zip Code 45056

Purpose of Disbursement  
Reimbursement for cell phone

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12644

Date of Disbursement

09 / 28 / 2005

Amount of Each Disbursement this Period

168.26

SUBTOTAL of Disbursements This Page (optional) .....

500.92

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 234 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Alysia Fischer

Mailing Address 320 W. Vine St.

City Oxford State OH Zip Code 45056

Purpose of Disbursement  
Reimbursement for copies

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12645

Date of Disbursement

09 / 28 / 2005

Amount of Each Disbursement this Period

92.23

**B.**

Full Name (Last, First, Middle Initial)

Mike Hersh

Mailing Address 12008 Milton St.

City Wheaton State MD Zip Code 20902

Purpose of Disbursement  
Writing articles/hand delivering invites

Candidate Name

003

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12894

Date of Disbursement

11 / 23 / 2005

Amount of Each Disbursement this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Mike Hersh

Mailing Address 12008 Milton St.

City Wheaton State MD Zip Code 20902

Purpose of Disbursement  
Salary - December

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12896

Date of Disbursement

12 / 14 / 2005

Amount of Each Disbursement this Period

250.00

**SUBTOTAL** of Disbursements This Page (optional) .....

592.23

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 235 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Holiday Inn

Mailing Address 550 C St. SW

City  
Washington

State  
DC

Zip Code  
20024

Purpose of Disbursement  
Hotel for PDA staff

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12849

Date of Disbursement

09 / 22 / 2005

Amount of Each Disbursement this Period

1220.53

B.

Full Name (Last, First, Middle Initial)

Hotels.com

Mailing Address 4124 S. McKen Ct.

City  
Springfield

State  
MO

Zip Code  
65804

Purpose of Disbursement  
Hotel in San Francisco

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12851

Date of Disbursement

07 / 29 / 2005

Amount of Each Disbursement this Period

258.00

C.

Full Name (Last, First, Middle Initial)

J&R Graphics and Printing

Mailing Address 2540 N. 35th Ave., Ste. 6

City  
Phoenix

State  
AZ

Zip Code  
85009

Purpose of Disbursement  
Canvas bags for chapter kits

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12852

Date of Disbursement

08 / 17 / 2005

Amount of Each Disbursement this Period

524.28

SUBTOTAL of Disbursements This Page (optional) .....

2002.81

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 236 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<b>A.</b> Full Name (Last, First, Middle Initial) J&R Graphics and Printing	<b>Transaction ID:</b> SB21B.12854 <b>Date of Disbursement</b>																				
Mailing Address 2540 N. 35th Ave., Ste. 6	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	7		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		1	7		2	0	0	5												
City Phoenix State AZ Zip Code 85009	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Stationery - Letterhead and envelopes Candidate Name	<table border="1"> <tr> <td colspan="10">185.55</td> </tr> </table>	185.55																			
185.55																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) J&R Graphics and Printing	<b>Transaction ID:</b> SB21B.12855 <b>Date of Disbursement</b>																				
Mailing Address 2540 N. 35th Ave., Ste. 6	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	7		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	7		2	0	0	5												
City Phoenix State AZ Zip Code 85009	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Stationery - Letterhead and envelopes Candidate Name	<table border="1"> <tr> <td colspan="10">185.55</td> </tr> </table>	185.55																			
185.55																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) JT PC Ability	<b>Transaction ID:</b> SB21B.12962 <b>Date of Disbursement</b>																				
Mailing Address 624 W. Gary Dr.	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>1</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1		2	7		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
1	1		2	7		2	0	0	5												
City Chandler State AZ Zip Code 85225	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Computer for operations department Candidate Name	<table border="1"> <tr> <td colspan="10">201.75</td> </tr> </table>	201.75																			
201.75																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

**572.85**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 237 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

JT PC Ability

Mailing Address 624 W. Gary Dr.

City Chandler State AZ Zip Code 85225

Purpose of Disbursement  
Computer expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12964

Date of Disbursement

11 / 30 / 2005

Amount of Each Disbursement this Period

2.00

B.

Full Name (Last, First, Middle Initial)

JT PC Ability

Mailing Address 624 W. Gary Dr.

City Chandler State AZ Zip Code 85225

Purpose of Disbursement  
Computer expense

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12965

Date of Disbursement

11 / 30 / 2005

Amount of Each Disbursement this Period

2.00

C.

Full Name (Last, First, Middle Initial)

Kinko's

Mailing Address 8325 W. Bell Rd.

City Peoria State AZ Zip Code 85382

Purpose of Disbursement  
Phx. flyers for play in CA

Candidate Name

004  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12876

Date of Disbursement

09 / 06 / 2005

Amount of Each Disbursement this Period

21.88

SUBTOTAL of Disbursements This Page (optional) .....

25.88

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 238 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Kinko's

Mailing Address 8325 W. Bell Rd.

City  
Peoria

State  
AZ

Zip Code  
85382

Purpose of Disbursement  
Copies of petition for DC

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12877

Date of Disbursement

09 / 19 / 2005

Amount of Each Disbursement this Period

64.64

B.

Full Name (Last, First, Middle Initial)

Kinko's

Mailing Address 8325 W. Bell Rd.

City  
Peoria

State  
AZ

Zip Code  
85382

Purpose of Disbursement  
Copies for DC

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12878

Date of Disbursement

09 / 22 / 2005

Amount of Each Disbursement this Period

10.72

C.

Full Name (Last, First, Middle Initial)

Kinko's

Mailing Address 8325 W. Bell Rd.

City  
Peoria

State  
AZ

Zip Code  
85382

Purpose of Disbursement  
Cutting copies for DC

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12879

Date of Disbursement

09 / 22 / 2005

Amount of Each Disbursement this Period

3.22

**SUBTOTAL** of Disbursements This Page (optional) .....

78.58

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 239 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Kinko's

Mailing Address 8325 W. Bell Rd.

City  
Peoria

State  
AZ

Zip Code  
85382

Purpose of Disbursement  
Business cards for Mimi Kennedy

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12880

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

58.73

B.

Full Name (Last, First, Middle Initial)

Lichtman, Trister and Ross

Mailing Address 1666 Connecticut Ave. NW, Ste. 500

City  
Washington

State  
DC

Zip Code  
20009

Purpose of Disbursement  
Old PDA debt for legal advice

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12593

Date of Disbursement

07 / 25 / 2005

Amount of Each Disbursement this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Lichtman, Trister and Ross

Mailing Address 1666 Connecticut Ave. NW, Ste. 500

City  
Washington

State  
DC

Zip Code  
20009

Purpose of Disbursement  
Old PDA debt for legal advice

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12881

Date of Disbursement

08 / 08 / 2005

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional) .....

558.73

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 240 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Lichtman, Trister and Ross

Mailing Address 1666 Connecticut Ave. NW, Ste. 500

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Old PDA debt for legal advice

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12882

Date of Disbursement

09 / 07 / 2005

Amount of Each Disbursement this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

Lichtman, Trister and Ross

Mailing Address 1666 Connecticut Ave. NW, Ste. 500

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Old PDA debt for legal advice

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12883

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

Lichtman, Trister and Ross

Mailing Address 1666 Connecticut Ave. NW, Ste. 500

City Washington State DC Zip Code 20009

Purpose of Disbursement  
Old PDA debt for legal advice

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12884

Date of Disbursement

11 / 07 / 2005

Amount of Each Disbursement this Period

250.00

**SUBTOTAL** of Disbursements This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 241 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Lichtman, Trister and Ross

Mailing Address 1666 Connecticut Ave. NW, Ste. 500

City  
Washington

State  
DC

Zip Code  
20009

Purpose of Disbursement  
Old PDA debt for legal advice

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12885

Date of Disbursement

12 / 07 / 2005

Amount of Each Disbursement this Period

250.00

B.

Full Name (Last, First, Middle Initial)

Lichtman, Trister and Ross

Mailing Address 1666 Connecticut Ave. NW, Ste. 500

City  
Washington

State  
DC

Zip Code  
20009

Purpose of Disbursement  
Phone call consult with Joe

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12886

Date of Disbursement

12 / 07 / 2005

Amount of Each Disbursement this Period

125.00

C.

Full Name (Last, First, Middle Initial)

Lucky Break

Mailing Address Collier Center  
2nd St. & Washington

City  
Phoenix

State  
AZ

Zip Code  
85004

Purpose of Disbursement  
Deposit for hall and food for DNC event

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12887

Date of Disbursement

11 / 25 / 2005

Amount of Each Disbursement this Period

1750.00

SUBTOTAL of Disbursements This Page (optional) .....

2125.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 242 / 288

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<b>A.</b> Full Name (Last, First, Middle Initial) Lucky Break	<b>Transaction ID:</b> SB21B.12889 <b>Date of Disbursement</b>
Mailing Address Collier Center 2nd St. & Washington	<div> <div>M M / D D / Y Y Y Y</div> <div>1 2 / 0 1 / 2 0 0 5</div> </div>
City Phoenix State AZ Zip Code 85004	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Balance for hall and food for DNC event Candidate Name	<div> <div>2795.91</div> <div>003 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) Office Depot	<b>Transaction ID:</b> SB21B.12903 <b>Date of Disbursement</b>
Mailing Address 4455 Connecticut Ave. NW	<div> <div>M M / D D / Y Y Y Y</div> <div>0 9 / 2 6 / 2 0 0 5</div> </div>
City Washington State DC Zip Code 20008	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Summit supplies and printing Candidate Name	<div> <div>35.11</div> <div>003 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) Office Max	<b>Transaction ID:</b> SB21B.12904 <b>Date of Disbursement</b>
Mailing Address #1139, 1571 N. Dysart Rd.	<div> <div>M M / D D / Y Y Y Y</div> <div>1 1 / 1 7 / 2 0 0 5</div> </div>
City Avondale State AZ Zip Code 85323	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Copies and flyers for DNC mailing Candidate Name	<div> <div>118.02</div> <div>003 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**SUBTOTAL** of Disbursements This Page (optional) .....

2949.04

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 243 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Cris Romero

Mailing Address 2315 N. 39th Pl.

City  
Phoenix

State  
AZ

Zip Code  
85008

Purpose of Disbursement  
House party DVD Production

Candidate Name

003

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12720

Date of Disbursement

08 / 08 / 2005

Amount of Each Disbursement this Period

600.00

B.

Full Name (Last, First, Middle Initial)

Sign a Rama

Mailing Address 3329 W. Catalina Ave.

City  
Phoenix

State  
AZ

Zip Code  
85017

Purpose of Disbursement  
Banners

Candidate Name

004

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12606

Date of Disbursement

07 / 25 / 2005

Amount of Each Disbursement this Period

972.90

C.

Full Name (Last, First, Middle Initial)

Sign a Rama

Mailing Address 3329 W. Catalina Ave.

City  
Phoenix

State  
AZ

Zip Code  
85017

Purpose of Disbursement  
Banners

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12916

Date of Disbursement

09 / 22 / 2005

Amount of Each Disbursement this Period

211.34

SUBTOTAL of Disbursements This Page (optional) .....

1784.24

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 244 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Kevin Spidel

Mailing Address 14250 Wigwam Blvd. #1113

City  
Litchfield Park

State  
AZ

Zip Code  
85340

Purpose of Disbursement  
Payroll - July

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12589

Date of Disbursement

07 / 12 / 2005

Amount of Each Disbursement this Period

1500.00

B.

Full Name (Last, First, Middle Initial)

Kevin Spidel

Mailing Address 14250 Wigwam Blvd. #1113

City  
Litchfield Park

State  
AZ

Zip Code  
85340

Purpose of Disbursement  
Reimb. for travel and phone

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12590

Date of Disbursement

07 / 26 / 2005

Amount of Each Disbursement this Period

302.93

C.

Full Name (Last, First, Middle Initial)

Kevin Spidel

Mailing Address 14250 Wigwam Blvd. #1113

City  
Litchfield Park

State  
AZ

Zip Code  
85340

Purpose of Disbursement  
Reimbursement for travel and phone

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12856

Date of Disbursement

08 / 08 / 2005

Amount of Each Disbursement this Period

203.21

SUBTOTAL of Disbursements This Page (optional) .....

2006.14

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 245 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Kevin Spidel

Mailing Address 14250 Wigwam Blvd. #1113

City  
Litchfield ParkState  
AZZip Code  
85340

Purpose of Disbursement

Salary - August

Candidate Name

001

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

State:

District:

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

Transaction ID: SB21B.12857

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	7		2	0	0	5

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Kevin Spidel

Mailing Address 14250 Wigwam Blvd. #1113

City  
Litchfield ParkState  
AZZip Code  
85340

Purpose of Disbursement

Payroll - September

Candidate Name

001

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

State:

District:

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

Transaction ID: SB21B.12858

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	0	5

Amount of Each Disbursement this Period

1750.00

C.

Full Name (Last, First, Middle Initial)

Kevin Spidel

Mailing Address 14250 Wigwam Blvd. #1113

City  
Litchfield ParkState  
AZZip Code  
85340

Purpose of Disbursement

Reimbursement for phone

Candidate Name

001

Category/  
Type

Office Sought:

☐

House

☐

Senate

☐

President

State:

District:

Disbursement For:

☐

Primary

☐

General

☐

Other (specify) ▼

Transaction ID: SB21B.12859

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	9		0	7		2	0	0	5

Amount of Each Disbursement this Period

221.56

SUBTOTAL of Disbursements This Page (optional) .....

2971.56

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 246 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<b>A.</b>	Full Name (Last, First, Middle Initial) Kevin Spidel	Transaction ID: SB21B.12860 Date of Disbursement 10 / 01 / 2005
	Mailing Address 14250 Wigwam Blvd. #1113	
	City Litchfield Park State AZ Zip Code 85340	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement Payroll - October	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b>	Full Name (Last, First, Middle Initial) Kevin Spidel	Transaction ID: SB21B.12861 Date of Disbursement 10 / 10 / 2005
	Mailing Address 14250 Wigwam Blvd. #1113	
	City Litchfield Park State AZ Zip Code 85340	Amount of Each Disbursement this Period 213.28
	Purpose of Disbursement Reimbursement for cell phone	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b>	Full Name (Last, First, Middle Initial) Kevin Spidel	Transaction ID: SB21B.12862 Date of Disbursement 11 / 01 / 2005
	Mailing Address 14250 Wigwam Blvd. #1113	
	City Litchfield Park State AZ Zip Code 85340	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Salary - November	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) .....

3213.28

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 247 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Kevin Spidel

Mailing Address 14250 Wigwam Blvd. #1113

City Litchfield Park State AZ Zip Code 85340

Purpose of Disbursement

Salary - November

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12863

Date of Disbursement

11 / 11 / 2005

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Kevin Spidel

Mailing Address 14250 Wigwam Blvd. #1113

City Litchfield Park State AZ Zip Code 85340

Purpose of Disbursement

Salary - November

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12864

Date of Disbursement

11 / 15 / 2005

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Kevin Spidel

Mailing Address 14250 Wigwam Blvd. #1113

City Litchfield Park State AZ Zip Code 85340

Purpose of Disbursement

Reimbursement for travel

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12865

Date of Disbursement

11 / 22 / 2005

Amount of Each Disbursement this Period

755.20

SUBTOTAL of Disbursements This Page (optional) .....

1755.20

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 248 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Kevin Spidel

Mailing Address 14250 Wigwam Blvd. #1113

City  
Litchfield ParkState  
AZZip Code  
85340Purpose of Disbursement  
Salary - December

Candidate Name

001

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12866

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	1	/	2	0	0	5

Amount of Each Disbursement this Period

1250.00

B.

Full Name (Last, First, Middle Initial)

Kevin Spidel

Mailing Address 14250 Wigwam Blvd. #1113

City  
Litchfield ParkState  
AZZip Code  
85340Purpose of Disbursement  
Salary - December

Candidate Name

001

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12867

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	4	/	2	0	0	5

Amount of Each Disbursement this Period

750.00

C.

Full Name (Last, First, Middle Initial)

Kevin Spidel

Mailing Address 14250 Wigwam Blvd. #1113

City  
Litchfield ParkState  
AZZip Code  
85340Purpose of Disbursement  
Reimbursement for phone

Candidate Name

001

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12868

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	4	/	2	0	0	5

Amount of Each Disbursement this Period

188.27

SUBTOTAL of Disbursements This Page (optional) .....

2188.27

TOTAL This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 249 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Kevin Spidel

Mailing Address 14250 Wigwam Blvd. #1113

City Litchfield Park State AZ Zip Code 85340

Purpose of Disbursement  
Reimbursement for Broadvoice

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12869

Date of Disbursement

12 / 31 / 2005

Amount of Each Disbursement this Period

33.42

B.

Full Name (Last, First, Middle Initial)

Staples

Mailing Address 10310 N. 91st. Ave.

City Peoria State AZ Zip Code 85345

Purpose of Disbursement  
Office supplies

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12917

Date of Disbursement

09 / 16 / 2005

Amount of Each Disbursement this Period

154.97

C.

Full Name (Last, First, Middle Initial)

Staples

Mailing Address 10310 N. 91st. Ave.

City Peoria State AZ Zip Code 85345

Purpose of Disbursement  
Copies and flyers

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12918

Date of Disbursement

11 / 17 / 2005

Amount of Each Disbursement this Period

7.55

SUBTOTAL of Disbursements This Page (optional) .....

195.94

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 250 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Staples

Mailing Address 10310 N. 91st. Ave.

City  
Peoria

State  
AZ

Zip Code  
85345

Purpose of Disbursement  
Office supplies

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12919

Date of Disbursement

11 / 30 / 2005

Amount of Each Disbursement this Period

163.46

B.

Full Name (Last, First, Middle Initial)

Tel3

Mailing Address 1020 NW 163rd Dr.

City  
Miami

State  
FL

Zip Code  
33169

Purpose of Disbursement  
Long distance

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12607

Date of Disbursement

07 / 20 / 2005

Amount of Each Disbursement this Period

25.00

C.

Full Name (Last, First, Middle Initial)

Tel3

Mailing Address 1020 NW 163rd Dr.

City  
Miami

State  
FL

Zip Code  
33169

Purpose of Disbursement  
Long distance

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12920

Date of Disbursement

08 / 24 / 2005

Amount of Each Disbursement this Period

25.00

SUBTOTAL of Disbursements This Page (optional) .....

213.46

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 251 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Tel3

Mailing Address 1020 NW 163rd Dr.

City State Zip Code  
Miami FL 33169

Purpose of Disbursement  
Long distance

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12921

Date of Disbursement

09 / 14 / 2005

Amount of Each Disbursement this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

Tel3

Mailing Address 1020 NW 163rd Dr.

City State Zip Code  
Miami FL 33169

Purpose of Disbursement  
Long distance

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12922

Date of Disbursement

09 / 16 / 2005

Amount of Each Disbursement this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

Tel3

Mailing Address 1020 NW 163rd Dr.

City State Zip Code  
Miami FL 33169

Purpose of Disbursement  
Long distance

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12923

Date of Disbursement

11 / 07 / 2005

Amount of Each Disbursement this Period

25.00

**SUBTOTAL** of Disbursements This Page (optional) .....

75.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 252 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Turtle Island Web Design

Mailing Address PO Box 10

City  
Lummi Island

State  
WA

Zip Code  
98262

Purpose of Disbursement  
Web service for July

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12611

Date of Disbursement

07 / 07 / 2005

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Turtle Island Web Design

Mailing Address PO Box 10

City  
Lummi Island

State  
WA

Zip Code  
98262

Purpose of Disbursement  
Server for July

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12612

Date of Disbursement

07 / 07 / 2005

Amount of Each Disbursement this Period

149.00

C.

Full Name (Last, First, Middle Initial)

Turtle Island Web Design

Mailing Address PO Box 10

City  
Lummi Island

State  
WA

Zip Code  
98262

Purpose of Disbursement  
August web services

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12932

Date of Disbursement

08 / 01 / 2005

Amount of Each Disbursement this Period

1161.00

SUBTOTAL of Disbursements This Page (optional) .....

2310.00

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 253 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Turtle Island Web Design

Mailing Address PO Box 10

City Lummi Island State WA Zip Code 98262

Purpose of Disbursement  
September web services

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12933

Date of Disbursement

09 / 01 / 2005

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Turtle Island Web Design

Mailing Address PO Box 10

City Lummi Island State WA Zip Code 98262

Purpose of Disbursement  
September server expense

Candidate Name

001  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12934

Date of Disbursement

09 / 14 / 2005

Amount of Each Disbursement this Period

149.00

C.

Full Name (Last, First, Middle Initial)

Turtle Island Web Design

Mailing Address PO Box 10

City Lummi Island State WA Zip Code 98262

Purpose of Disbursement  
Travel reimbursement

Candidate Name

002  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12983

Date of Disbursement

09 / 14 / 2005

Amount of Each Disbursement this Period

263.40

SUBTOTAL of Disbursements This Page (optional) ▶

1412.40

TOTAL This Period (last page this line number only) ▶

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 254 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Turtle Island Web Design

Mailing Address PO Box 10

City Lummi Island State WA Zip Code 98262

Purpose of Disbursement

Travel reimbursement

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12984

Date of Disbursement

09 / 19 / 2005

Amount of Each Disbursement this Period

225.82

B.

Full Name (Last, First, Middle Initial)

Turtle Island Web Design

Mailing Address PO Box 10

City Lummi Island State WA Zip Code 98262

Purpose of Disbursement

Salary - October

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12985

Date of Disbursement

10 / 01 / 2005

Amount of Each Disbursement this Period

1500.00

C.

Full Name (Last, First, Middle Initial)

Turtle Island Web Design

Mailing Address PO Box 10

City Lummi Island State WA Zip Code 98262

Purpose of Disbursement

Reimbursement for server and phone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12986

Date of Disbursement

10 / 10 / 2005

Amount of Each Disbursement this Period

230.20

SUBTOTAL of Disbursements This Page (optional) .....

1956.02

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 255 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Turtle Island Web Design

Mailing Address PO Box 10

City  
Lummi Island

State  
WA

Zip Code  
98262

Purpose of Disbursement  
Salary - November

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12987

Date of Disbursement

11 / 01 / 2005

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Turtle Island Web Design

Mailing Address PO Box 10

City  
Lummi Island

State  
WA

Zip Code  
98262

Purpose of Disbursement  
Salary - November

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12988

Date of Disbursement

11 / 10 / 2005

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Turtle Island Web Design

Mailing Address PO Box 10

City  
Lummi Island

State  
WA

Zip Code  
98262

Purpose of Disbursement  
Web site domain/server

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12989

Date of Disbursement

11 / 23 / 2005

Amount of Each Disbursement this Period

736.40

SUBTOTAL of Disbursements This Page (optional) .....

2236.40

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 256 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

<b>A.</b> Full Name (Last, First, Middle Initial) Turtle Island Web Design	<b>Transaction ID:</b> SB21B.12990 <b>Date of Disbursement</b>																				
Mailing Address PO Box 10	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	1		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	1		2	0	0	5												
City Lummi Island State WA Zip Code 98262	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary - December Candidate Name	<table border="1"> <tr> <td colspan="10">1250.00</td> </tr> </table>	1250.00																			
1250.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) Turtle Island Web Design	<b>Transaction ID:</b> SB21B.12991 <b>Date of Disbursement</b>																				
Mailing Address PO Box 10	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	5		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		0	5		2	0	0	5												
City Lummi Island State WA Zip Code 98262	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Reimbursement for phone Candidate Name	<table border="1"> <tr> <td colspan="10">55.18</td> </tr> </table>	55.18																			
55.18																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) Turtle Island Web Design	<b>Transaction ID:</b> SB21B.12992 <b>Date of Disbursement</b>																				
Mailing Address PO Box 10	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>5</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	4		2	0	0	5
M	M	/	D	D	/	Y	Y	Y	Y												
1	2		1	4		2	0	0	5												
City Lummi Island State WA Zip Code 98262	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement Salary - December Candidate Name	<table border="1"> <tr> <td colspan="10">250.00</td> </tr> </table>	250.00																			
250.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

**SUBTOTAL** of Disbursements This Page (optional) .....

1555.18

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 257 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

United Airlines

Mailing Address PO Box 1460

City  
Milwaukee

State  
WI

Zip Code  
53201

Purpose of Disbursement  
Kevin to DC

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12937

Date of Disbursement

09 / 09 / 2005

Amount of Each Disbursement this Period

2.00

B.

Full Name (Last, First, Middle Initial)

United Airlines

Mailing Address PO Box 1460

City  
Milwaukee

State  
WI

Zip Code  
53201

Purpose of Disbursement  
Kevin to DC

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12938

Date of Disbursement

09 / 09 / 2005

Amount of Each Disbursement this Period

320.31

C.

Full Name (Last, First, Middle Initial)

United Airlines

Mailing Address PO Box 1460

City  
Milwaukee

State  
WI

Zip Code  
53201

Purpose of Disbursement  
Michele to DC

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12939

Date of Disbursement

09 / 09 / 2005

Amount of Each Disbursement this Period

272.80

SUBTOTAL of Disbursements This Page (optional) .....

595.11

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

United Airlines

Mailing Address PO Box 1460

City  
Milwaukee

State  
WI

Zip Code  
53201

Purpose of Disbursement  
Angie to DC

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12940

Date of Disbursement

09 / 09 / 2005

Amount of Each Disbursement this Period

272.80

B.

Full Name (Last, First, Middle Initial)

US Airways

Mailing Address PO Box 1501

City  
Winston-Salem

State  
NC

Zip Code  
27102

Purpose of Disbursement  
Michele and Angie to DC

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12941

Date of Disbursement

09 / 09 / 2005

Amount of Each Disbursement this Period

148.60

C.

Full Name (Last, First, Middle Initial)

US Airways

Mailing Address PO Box 1501

City  
Winston-Salem

State  
NC

Zip Code  
27102

Purpose of Disbursement  
Tim to DC

Candidate Name

002  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.12942

Date of Disbursement

10 / 14 / 2005

Amount of Each Disbursement this Period

178.40

SUBTOTAL of Disbursements This Page (optional) ►

599.80

TOTAL This Period (last page this line number only) ►

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 259 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1765 3 Mile Rd. NE

City  
Grand Rapids

State  
MI

Zip Code  
49505

Purpose of Disbursement  
Stamps

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12947

Date of Disbursement

11 / 17 / 2005

Amount of Each Disbursement this Period

166.50

B.

Full Name (Last, First, Middle Initial)

USPS

Mailing Address 1765 3 Mile Rd. NE

City  
Grand Rapids

State  
MI

Zip Code  
49505

Purpose of Disbursement  
Stamps

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12948

Date of Disbursement

11 / 17 / 2005

Amount of Each Disbursement this Period

37.00

C.

Full Name (Last, First, Middle Initial)

Verizon

Mailing Address PO Box 489

City  
Newark

State  
NJ

Zip Code  
07101

Purpose of Disbursement  
Cell phone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12613

Date of Disbursement

07 / 05 / 2005

Amount of Each Disbursement this Period

44.34

SUBTOTAL of Disbursements This Page (optional) ▶

247.84

TOTAL This Period (last page this line number only) ▶

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 260 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Verizon

Mailing Address PO Box 489

City  
Newark

State  
NJ

Zip Code  
07101

Purpose of Disbursement

Cell phone

Candidate Name

001

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Transaction ID: SB21B.12949

Date of Disbursement

08 / 08 / 2005

Amount of Each Disbursement this Period

88.61

B.

Full Name (Last, First, Middle Initial)

Verizon

Mailing Address PO Box 489

City  
Newark

State  
NJ

Zip Code  
07101

Purpose of Disbursement

Cell phone

Candidate Name

001

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Transaction ID: SB21B.12950

Date of Disbursement

08 / 17 / 2005

Amount of Each Disbursement this Period

44.27

C.

Full Name (Last, First, Middle Initial)

Verizon

Mailing Address PO Box 489

City  
Newark

State  
NJ

Zip Code  
07101

Purpose of Disbursement

Cell phone

Candidate Name

001

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Transaction ID: SB21B.12951

Date of Disbursement

09 / 28 / 2005

Amount of Each Disbursement this Period

17.31

SUBTOTAL of Disbursements This Page (optional) .....

150.19

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 261 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Verizon

Mailing Address PO Box 489

City  
Newark

State  
NJ

Zip Code  
07101

Purpose of Disbursement

Cell phone

Candidate Name

001

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

State:

District:

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

Transaction ID: SB21B.12952

Date of Disbursement

10 / 24 / 2005

Amount of Each Disbursement this Period

50.00

B.

Full Name (Last, First, Middle Initial)

Verizon

Mailing Address PO Box 489

City  
Newark

State  
NJ

Zip Code  
07101

Purpose of Disbursement

Cell phone

Candidate Name

001

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

State:

District:

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

Transaction ID: SB21B.12953

Date of Disbursement

12 / 12 / 2005

Amount of Each Disbursement this Period

133.00

C.

Full Name (Last, First, Middle Initial)

Henry Weil

Mailing Address 7811 Leo Pl.

City  
Westminister

State  
CA

Zip Code  
92683

Purpose of Disbursement

Salary for field assistance

Candidate Name

001

Category/  
Type

Office Sought:

☐ House

☐ Senate

☐ President

State:

District:

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

Transaction ID: SB21B.12848

Date of Disbursement

10 / 13 / 2005

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) .....

683.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 262 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Michele White

Mailing Address 12510 W. Bird Lane

City Litchfield Park State AZ Zip Code 85340

Purpose of Disbursement  
Reimbursement for phone payment

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District:  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12596

Date of Disbursement

07 / 26 / 2005

Amount of Each Disbursement this Period

46.43

B.

Full Name (Last, First, Middle Initial)

Michele White

Mailing Address 12510 W. Bird Lane

City Litchfield Park State AZ Zip Code 85340

Purpose of Disbursement  
Salary - September

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District:  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12890

Date of Disbursement

09 / 07 / 2005

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Michele White

Mailing Address 12510 W. Bird Lane

City Litchfield Park State AZ Zip Code 85340

Purpose of Disbursement  
Reimbursement for phone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House ☐ Senate ☐ President  
State: District:  
Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12891

Date of Disbursement

09 / 07 / 2005

Amount of Each Disbursement this Period

46.43

SUBTOTAL of Disbursements This Page (optional) .....

1092.86

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Michele White

Mailing Address 12510 W. Bird Lane

City Litchfield Park State AZ Zip Code 85340

Purpose of Disbursement

November Salary

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12981

Date of Disbursement

11 / 01 / 2005

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

Michele White

Mailing Address 12510 W. Bird Lane

City Litchfield Park State AZ Zip Code 85340

Purpose of Disbursement

Salary - December

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12982

Date of Disbursement

12 / 01 / 2005

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Michele White

Mailing Address 12510 W. Bird Lane

City Litchfield Park State AZ Zip Code 85340

Purpose of Disbursement

Reimbursement for phone

Candidate Name

001

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12892

Date of Disbursement

12 / 05 / 2005

Amount of Each Disbursement this Period

255.17

**SUBTOTAL** of Disbursements This Page (optional) .....

2255.17

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 264 / 288

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

**A.**

Full Name (Last, First, Middle Initial)

Michele White

Mailing Address 12510 W. Bird Lane

City  
Litchfield Park

State  
AZ

Zip Code  
85340

Purpose of Disbursement  
Reimbursement for phone

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12893

Date of Disbursement

12 / 31 / 2005

Amount of Each Disbursement this Period

232.08

**B.**

Full Name (Last, First, Middle Initial)

Nate Wilkes

Mailing Address 3170 Washington Blvd.

City  
Cleveland Heights

State  
OH

Zip Code  
44118

Purpose of Disbursement  
Reimbursement for press releases

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12899

Date of Disbursement

09 / 30 / 2005

Amount of Each Disbursement this Period

332.00

**C.**

Full Name (Last, First, Middle Initial)

Wyndam Hotel

Mailing Address 50 E. Adams St.

City  
Phoenix

State  
AZ

Zip Code  
85004

Purpose of Disbursement  
Hospitality Suite for DNC meetings

Candidate Name

003  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12958

Date of Disbursement

12 / 06 / 2005

Amount of Each Disbursement this Period

332.85

**SUBTOTAL** of Disbursements This Page (optional) .....

896.93

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

PROGRESSIVE VOTE AKA PROGRESSIVE DEMOCRATS OF AMERICA

A.

Full Name (Last, First, Middle Initial)

Wyndam Hotel

Mailing Address 50 E. Adams St.

City  
PhoenixState  
AZZip Code  
85004Purpose of Disbursement  
Hotel room for S. Shaff DNC events

Candidate Name

002  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.12960

Date of Disbursement

M M / D D / Y Y Y Y  
1 2 / 0 6 / 2 0 0 5

Amount of Each Disbursement this Period

333.37

SUBTOTAL of Disbursements This Page (optional) .....

333.37

TOTAL This Period (last page this line number only) .....

93310.84

Image# 28991202874

Form/Schedule: **SB21B** The following people received payment from this payroll amount: 1.) Alysia Fischer, 7/14/2005, Net pay \$833.4-  
Transaction ID: **SB21B.12558** 9, employed as PDA Policy Director. 2.) Michele White, 7/14/2005, Net pay \$1207.42, employed as PDA Director  
of Operations.

Form/Schedule: **SB21B** These services were for an advisory board fundraiser for PDA on 11/15/2005, not related to any candidates.  
Transaction ID: **SB21B.12639**

\*\*\*\*\*

**Image# 28991202875**

Form/Schedule: **SB21B** Original vendor for this reimbursement amount was AT&T, PO Box 8212, Aurora, IL 60572 in the amount of \$21.62.

Transaction ID: **SB21B.12562**

Form/Schedule: **SB21B** Original vendors for this reimbursement amount were 1.) Walmart, 3721 E. Thomas Rd., Phoenix, AZ 85008 in the amount of \$45.37, 2.) Dollar Tree, 3909 E. Thomas Rd., Phoenix, AZ 85008 in the amount of \$15.16, and 3.) Tobacco and Pipes Plus Inc., 3245 E. Thomas Rd., Phoenix, AZ 85018 in the amount of \$9.84. Everything purchased was for supplies for party packs, a PDA organizational fundraiser (not for a candidate).

Transaction ID: **SB21B.12563**

\*\*\*\*\*

Form/Schedule: **SB21B** Original vendor for this reimbursement amount was USPS, 4949 E. Van Buren St., Phoenix, AZ 85026, in the amount of \$112.24 for shipping supplies for party packs, a PDA organizational fundraiser (not for a candidate).  
Transaction ID: **SB21B.12564**

Form/Schedule: **SB21B** Original vendors for this reimbursement were 1.) USPS, 4949 E. Van Buren St., Phoenix, AZ 85026 for the following amounts and dates: \$2.96 on 6/21/05, \$11.55 on 6/28/05, \$18.95 on 7/14/05, \$8.07 on 7/19/05, \$3.85 on 7/22/05, \$3.85 on 7/25/05, 2.) Finis Productions, 2315 N. 39th Pl. Phoenix, AZ 85008 for \$16.00 on 7/22/05, 3.) AT&T, PO Box 8212, Aurora, IL 60572 for \$10.81 on 7/25/05 and 4.) Staples, 3903 E. Thomas Rd. Phoenix, AZ 85018, for \$5.72 on 7/22/05 for folders for fundraising packs. It was an organization fundraiser, not for candidates. The AT&T payment was for long distance, not related to the fundraiser.  
Transaction ID: **SB21B.12568**

**Image# 28991202877**

Form/Schedule: **SB21B**      Original vendor was America West Airlines, 4000 E. Sky Harbor Blvd., Phoenix, AZ 85034 for airfare  
Transaction ID: **SB21B.12974**

Form/Schedule: **SB21B**      Original vendor was America West Airlines, 4000 E. Sky Harbor Blvd., Phoenix, AZ 85034 for airfare  
Transaction ID: **SB21B.12975**

\*\*\*\*\*

Image# 28991202878

Form/Schedule: **SB21B** Original vendor was the USPS. Purchase date was November, 2005 for stamps to send thank-you letters to donors.

Transaction ID: **SB21B.12874**

Form/Schedule: **SB21B** Original vendors for this reimbursement were: 1.) Verizon, PO Box 17120, Tucson, AZ 85731 in the amount of \$2-  
Transaction ID: **SB21B.12610** 50.00 for cell phone expenses in April/May 2005. 2.) The remaining \$250.00 was for cab fare to various cab companies; the amounts did not exceed \$200.00 for any individual company and therefore do not need to be itemized.

\*\*\*\*\*

Image# 28991202879

Form/Schedule: **SB21B** Original vendor was Verizon, PO Box 15108, Albany, NY 12212 for cell phone.

Transaction ID: **SB21B.12977**

Form/Schedule: **SB21B** Original vendor was Verizon, PO Box 15108, Albany, NY 12212 (\$2084.47) for cell phone. The remaining amount  
Transaction ID: **SB21B.12978** was for taxis, no single vendor received an aggregate exceeding \$200.00.

\*\*\*\*\*

Image# 28991202880

Form/Schedule: **SB21B** Original vendors were: Currant, PO Box 3264, Amherst, MA 01004 (\$543.48) for computer expenses, Verizon, PO Box 15108, Albany, NY 12212 (\$644.59) for cell phone, GTE (merged with Verizon) \$449.24 for land phone line. The  
Transaction ID: **SB21B.12979** remaining amount was for taxis - no aggregates over \$200.00

Form/Schedule: **SB21B** This was for organizational fundraising for PDA, not for any candidates.  
Transaction ID: **SB21B.12706**

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**Image# 28991202881**

Form/Schedule:**SB21B** This was for organizational fundraising for PDA, not for any candidates.

Transaction ID: **SB21B.12708**

Form/Schedule:**SB21B** This was for organizational fundraising for PDA, not for any candidates.

Transaction ID: **SB21B.12709**

\*\*\*\*\*

**Image# 28991202882**

Form/Schedule:**SB21B** This was for organizational fundraising for PDA, not for any candidates.

Transaction ID: **SB21B.12710**

Form/Schedule:**SB21B** This was for organizational fundraising for PDA, not for any candidates.

Transaction ID: **SB21B.12711**

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**Image# 28991202883**

Form/Schedule:**SB21B** This was for organizational fundraising for PDA, not for any candidates.

Transaction ID: **SB21B.12712**

Form/Schedule:**SB21B** This was for organizational fundraising for PDA, not for any candidates.

Transaction ID: **SB21B.12713**

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**Image# 28991202884**

Form/Schedule:**SB21B** This was for organizational fundraising for PDA, not for any candidates.

Transaction ID: **SB21B.12714**

Form/Schedule:**SB21B** This was for organizational fundraising for PDA, not for any candidates.

Transaction ID: **SB21B.12715**

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Image# 28991202885

Form/Schedule: **SB21B** This was for organizational fundraising for PDA, not for any candidates.

Transaction ID: **SB21B.12716**

Form/Schedule: **SB21B** Original vendor for this reimbursement was FedEx Kinko's, 317 Pennsylvania Ave., Washington, DC, 20003 for cop-  
ies of flyers to hand out at event

Transaction ID: **SB21B.12642**

\*\*\*\*\*

Image# 28991202886

Form/Schedule: **SB21B** Original vendors for this reimbursement were Verizon, PO Box 25506, Lehigh Valley, PA 18002 (\$162.97) for cell phone and Southwest Airlines, PO Box 36647-1CR, Dallas, TX 75235 (\$78.40) for flight from Ohio to DC  
Transaction ID: **SB21B.12643**

Form/Schedule: **SB21B** Original vendor for this reimbursement was Verizon, PO Box 25506, Lehigh Valley, PA 18002 for cell phone  
Transaction ID: **SB21B.12644**

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Image# 28991202887

Form/Schedule: **SB21B** Original vendor for this reimbursement was FedEx Kinko's, 255 Courtland St. NE, Atlanta, GA 30303 for flyers  
Transaction ID: **SB21B.12645** to hand out at an event

Form/Schedule: **SB21B** This summit was an organization fundraiser, not for any candidates.  
Transaction ID: **SB21B.12903**

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Image# 28991202888

Form/Schedule: **SB21B** This summit was an organization fundraiser, not for any candidates.

Transaction ID: **SB21B.12904**

Form/Schedule: **SB21B** Original vendors for this reimbursement amount were: 1.) T-Mobile, PO Box 742596, Cincinnati, OH 45274 in the amount of \$192.14 on 7/14/2005 for cell phone payment, 2.) Yellow Cab, Washington, DC in the amount of \$86.50 on 6/28/2005 for cab fare, 3.) CVS Pharmacy, 4309 Connecticut Ave., Washington, DC in the amount of \$9.09 on 7/1/2005 for a meal, 4.) Rayburn Cafe, 3202 Rayburn Bldg., Washington, DC in the amount of \$6.30 on 6/28/2005 and \$8.90 on 7/1/2005 for meals.

Transaction ID: **SB21B.12598**

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**Image# 28991202889**

Form/Schedule: **SB21B**      The expenses for this travel reimbursement did not exceed \$200.00 for any single original vendor and does not  
Transaction ID: **SB21B.12856** need to be itemized.

Form/Schedule: **SB21B**      Original vendor was TMobile, PO Box 37380, Albuquerque, NM 87176 for cell phone.  
Transaction ID: **SB21B.12859**

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**Image# 28991202890**

Form/Schedule: **SB21B** Original vendor was TMobile, PO Box 37380, Albuquerque, NM 87176 for cell phone.

Transaction ID: **SB21B.12861**

Form/Schedule: **SB21B** Original vendors were America West Airlines, 4000 E. Sky Harbor Blvd., Phoenix, AZ 85034 (\$609.20) and the remaining amount was for taxis in DC which did not exceed \$200.00 and does not need to be itemized.

Transaction ID: **SB21B.12865**

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**Image# 28991202891**

Form/Schedule: **SB21B** Original vendor was Broadvoice, 9 Executive Park Dr., Billerica, MA 01862 for phone service.

Transaction ID: **SB21B.12868**

Form/Schedule: **SB21B** Original vendor was Broadvoice, 9 Executive Park Dr., Billerica, MA 01862 for phone service.

Transaction ID: **SB21B.12869**

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Image# 28991202892

Form/Schedule: **SB21B**      Original vendor was Holiday Inn Express, 550 C St. SW, Washington, DC 20024.  
Transaction ID: **SB21B.12983**

Form/Schedule: **SB21B**      Original vendor was Expedia, 1444 W. Auto Dr., Tempe, AZ 85284.  
Transaction ID: **SB21B.12984**

Image# 28991202893

Form/Schedule: **SB21B** Original vendors are TMobile, PO Box 37380, Albuquerque, NM 87176 for cell phone and Pair Networks, 2403 Sidney St., Ste. 510, Pittsburgh, PA 15203 for server.  
Transaction ID: **SB21B.12986**

Form/Schedule: **SB21B** Original vendor is Pair Networks, 2403 Sidney St., Ste. 510, Pittsburgh, PA 15203  
Transaction ID: **SB21B.12989**

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**Image# 28991202894**

Form/Schedule: **SB21B** Original vendor is TMobile, PO Box 37380, Albuquerque, NM 87176 for cell phone

Transaction ID: **SB21B.12991**

Form/Schedule: **SB21B** Original vendor for this reimbursement amount was Cox Cable, PO Box 78071, Phoenix, AZ 85062. The original purchase date was 7/09/2005 for \$46.43 for phone bill.

Transaction ID: **SB21B.12596**

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**Image# 28991202895**

Form/Schedule: **SB21B** Original vendor for this reimbursement amount was Cox Cable, PO Box 78071, Phoenix, AZ 85062.

Transaction ID: **SB21B.12891**

Form/Schedule: **SB21B** Original vendor was TMobile, PO Box 37380, Albuquerque, NM 87176 for cell phone.

Transaction ID: **SB21B.12892**

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Image# 28991202896

Form/Schedule: **SB21B**      Original vendor was TMobile, PO Box 37380, Albuquerque, NM 87176 for cell phone.  
Transaction ID: **SB21B.12893**

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